

**UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

**COLIN C. RUDY, on Behalf of Himself  
and Others Similar Situated,**

**Plaintiff,**

**V.**

**CONSOLIDATED RESTAURANT  
COMPANIES, INC., et al.,**

## Defendants.

~~~~~

**CIVIL ACTION NO.**  
**3:08-CV-00904-L**

**SUPPLEMENTAL APPENDIX IN SUPPORT OF DEFENDANTS’  
MOTION FOR SUMMARY JUDGMENT**

Mark A. Shank  
State Bar No. 18090800  
Bridget A. Blinn  
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## ATTORNEYS FOR DEFENDANTS

| Ex. No. | Document Description                          | App.  |
|---------|-----------------------------------------------|-------|
| 1.      | Declaration of Roy Anderson and Audit Notes   | 1-25  |
| 2.      | Declaration of Clayton Killam and Audit Notes | 26-75 |

Respectfully submitted,

/s/ Bridget A. Blinn

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**CERTIFICATE OF SERVICE**

I hereby certify that on July 6, 2010, I served a copy of the above and foregoing on all counsel of record via the Court's ECF system.

s/ Bridget A. Blinn  
Bridget A. Blinn

DECLARATION OF ROY ANDERSON

1. My name is Roy Anderson. I am over 21 years old and am in all ways competent to make this declaration. I am Risk Manager for Consolidated Restaurant Operations, Inc. ("CRO"). I have never been convicted of a felony or misdemeanor involving moral turpitude. I have personal knowledge of the facts stated herein and affirm that they are all true and correct.

2. From May 1, 2000 to April 27, 2006, I served as an Internal Auditor for CRO. In that capacity, one of my responsibilities was auditing restaurants to ensure compliance with CRO policies.

3. On May 27, 2004 and April 28, 2005, I audited the Silver Fox restaurant in Fort Worth. A true and correct copy of my audit notes for the May 27, 2004 audit is attached hereto as Exhibit A. A true and correct copy of my audit notes for April 28, 2005 is attached hereto as Exhibit B.

4. On both May 27, 2004 and April 28, 2005, I checked to ensure that the federal "5-in-1" poster was posted in the Silver Fox restaurant. It was located in the area where servers pick up food from the kitchen, right outside the office, clearly visible to all restaurant staff.

5. I ensured that the poster was current and contained the correct minimum wage provision at each audit. At the 2004 audit, I marked off each item with a checklist. I did not do so in 2005, but I am certain that the poster was there at that time.

I declare under penalty of perjury that the foregoing is true and correct.



ROY ANDERSON, DECLARANT



Revised 05/2004

ALOHA RESTAURANT

TO: John Saleeby  
 FROM: Roy Anderson  
 SUBJECT: RESTAURANT AUDIT  
 DATE: 5/28/04

AUDIT DATE: 5/27/04  
 LAST AUDIT: N/A

CC: M. Camm  
N. Garvey  
R. Weaver

THE AUDIT OF RESTAURANT # 621 RESULTED IN A GRADE OF "D" AS FOLLOWS:

☒ RESPONSE REQUIRED

RESTAURANT VISIT SCORE N/A

GRADING SCHEDULE

| CATEGORIES                      | CURRENT AUDIT | LAST AUDIT |
|---------------------------------|---------------|------------|
| 1. DEPOSITS                     | <u>F</u>      |            |
| 2. ALOHA SECURITY               | <u>B</u>      |            |
| 3. RESTAURANT ACCOUNTING        | <u>C</u>      |            |
| 4. SERVER CHECKOUTS & TIP SHARE | <u>A</u>      |            |
| 5. ADMINISTRATIVE PROCEDURES    | <u>F</u>      |            |
| 6. LIQUOR REPORTS               | <u>F</u>      |            |
| 7. UNIT SECURITY                | <u>F</u>      |            |
| 8. I-9's                        | <u>A</u>      |            |
| OVERALL GRADE                   | <u>D</u>      |            |

(1.625)

## OVERALL GRADING SCALE

3.5 - 4.0 = A  
 3.0 - 3.49 = B  
 2.0 - 2.99 = C  
 1.0 - 1.99 = D  
 0.0 - .99 = F

Area Supervisor N. Garvey

## CRITICAL FOUR RESULTS

| Category     | Bonus/Fine                | Total |
|--------------|---------------------------|-------|
| Edit Punch   | \$0 / <u>\$50</u> - \$100 |       |
| Admin. Files | \$0 / \$50 / <u>\$100</u> |       |
| Liq. Permits | \$0 / \$50 / <u>\$100</u> |       |
| I-9's        | \$0 <u>\$50</u> - \$100   |       |

Total Bonus/Fine \$ -100

I-9 BONUS (\$250) YES / NO

EXHIBIT

A

3793

GRADING DEPOSITS

1. *ok* DEPOSIT SLIP NOT VERIFIED  
WITH TWO MANAGER'S INITIALS.  
5 PTS. EACH (25 PTS. MAX)
2. *ok* DEPOSIT SLIPS & ARMORED CAR  
RECEIPTS NOT RETAINED 3  
PERIODS.  
5 PTS. EACH (25 PTS. MAX)
- ③ DEPOSIT ACCURACY  
25 PTS.
- ④ LATE DEPOSITS  
1 LATE = 10 PTS  
2 LATE = 20 PTS  
3 LATE = 50 PTS

RECOMMENDATIONS

- [ ] THE DEPOSIT SHOULD BE VERIFIED  
BY BOTH THE CLOSING & THE OPENING  
MANAGERS & BOTH SHOULD INITIAL THE  
DEPOSIT SLIP.
- [ ] THE RETENTION PERIOD FOR  
DEPOSIT SLIPS & ARMORED CAR RECEIPTS  
IS THREE FULL PERIODS. THEY SHOULD BE  
KEPT SEPARATELY IN DATE ORDER.
- [✓] ALL DEPOSITS MUST BE ACCURATE.  
NO DEPOSIT MAY BE "ROUNDED OFF". ALL CURRENCY,  
COIN AND CHECKS MUST BE LISTED SEPERATELY.
- [✓] DEPOSITS ARE TO BE MADE DAILY PRIOR  
TO 2:00PM.

COMMENTS: \_\_\_\_\_

3) rounding deposits
4.) Not making daily  
deposits. Appears  
deposits made every  
2-3 days
TOTAL PTS.

| <u>SCALE</u> |     |
|--------------|-----|
| 100-90       | = A |
| 89-80        | = B |
| 79-70        | = C |
| 69-60        | = D |
| BELOW 60     | = F |

*-75**F*

1

GRADING ALOHA SECURITY

1/1A MANAGERS NOT USING  
SWIPE CARDS AT TERMINALS.  
40 PTS.

2 MUST USE MAG CARD BOX  
BOX - NOT CHECKED.  
10 PTS EACH. (40 PTS. MAX)

3. OK CREDIT CARD BATCHES NOT  
SETTLED ON A DAILY BASIS.  
25 PTS. EACH

4. OK ALOHA EMPLOYEE ACCESS  
20 PTS.

RECOMMENDATIONS

[ ] SWIPE CARDS MUST BE USED AS A  
SECURITY MEASURE AGAINST THEFT.

[✓] ALL EMPLOYEES WHO HAVE ACCESS  
TO THE ALOHA SYSTEM MUST USE MAG CARDS  
WHEN ACCESSING THE ALOHA SYSTEM.

[ ] CREDIT CARD BATCHED MUST BE  
SETTLED AT THE END OF EACH DAY'S  
BUSINESS.

[ ] ALOHA EMPLOYEE ACCESS LIST  
MUST BE CURRENT AND MATCH THE ACTIVE EMPLOYEE  
ROSTER.

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: \_\_\_\_\_

-10 2.) PM BAR - mag card not ✓  
-10 3. Saleeby - " " " "

3.) reviewed CC. BATCHES  
5/6 to present. OK

4.) (2) term employees  
still in Aloha Access.  
Mgt. will remove.

RESTAURANT ACCOUNTINGDAILY ENVELOPES  
MUST INCLUDE:

- 5 PTS EA. ALOHA SALES REPORT
- 5 PTS EA. CREDIT CARD SLIPS AND EDC TRANSACTION REPORT
- 5 PTS EA. VOID REPORT REVIEWED AND SIGNED BY MANAGEMENT
- 5 PTS EA. AUDIT REPORT REVIEWED AND SIGNED BY MANAGER
- 5 PTS EA. GIFT CERTIFICATES NOT VOIDED AT THE TIME OF REDEMPTION
- ⑥ 5 PTS EA. DOCUMENTS/RECEIPTS FOR ALL CASH PAIDOUTS

- 25 PTS.RECOMMENDATIONS

- [ ] ALL DAILY ENVELOPES MUST BE SUBMITTED TO THE CORPORATE OFFICE.
- [ ] ALL EXPENSES & INCOME SHOWN ON THE DAILY SALES REPORT MUST HAVE BACKUP IN THE DAILY ENVELOPE.
- [ ] THE EDC REPORT MUST BE RUN FOR THE CORRECT DAY'S BUSINESS & PLACED IN THE DAILY ENVELOPE.
- [ ] ALL VOID REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL AUDIT REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL OFF LINE GIFT CERTIFICATES AND VIP CARDS SHOULD BE VOIDED AT THE TIME OF REDEMPTION.
- [✓] SUPPORTING DOCUMENTATION MUST BE INCLUDED IN THE DSR.

COMMENTS: \_\_\_\_\_

(14) misc. payouts - no receipts  
 (\$572.86) see Attached

\* will go to CASH o/s.

TOTAL PTS.SCALE

100-90 = A  
 89-80 = B  
 79-70 = C  
 69-60 = D  
 BELOW 60 = F

- 25

C

SERVER CHECKOUT, TIP SHARE & EDITED PUNCHES

RECOMMENDATIONS

1. OK INFORMATION ON CHECKOUT REPORT IS COMPLETE AND INCLUDES: ALL CREDIT CARD RECEIPTS, ALL GIFT CERTIFICATES AND PROMOTIONAL COUPONS, AND CASH RECEIVED FROM SERVER. 35 PTS.
2. OK SERVER CHECKOUT REPORT SIGNED BY MANAGEMENT & RETAINED 3 PERIODS. 30 PTS.
3. OK TIP SHARE CALCULATION SHEET RETAINED 3 PERIODS. 25 PTS.
4. 4 TIP TRAC
5. OK EDITED PUNCH LIST NOT RETAINED FOR 3 YEARS AND NOT SIGNED BY EMPLOYEE AND MANAGER. 50 PTS.
6. OK EDITED PUNCH ACCURACY REVIEW 20 PTS. PER OCCURANCE
7. OK PAYROLL CHECKS NOT DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL. 25 PTS.

- [ ] SERVER CHECKOUTS ARE PERFORMED EACH SHIFT AND REQUIRES MANAGEMENT TO VERIFY SUPPORTING DOCUMENTS PERTAINING TO CHECKOUT SHEET.
- [ ] CORPORATE POLICY STATES THAT SERVER CHECKOUTS BE RETAINED FOR THREE PERIODS AND SIGNED BY MANAGEMENT.
- [ ] TIP SHARE CALCULATION SHEET MUST BE RETAINED FOR 3 PERIODS.
- [ ✓ ] ALL EMPLOYEES MUST SIGN TRAC REPORT WHEN RECEIVING PAYROLL CHECK. MANAGER WILL DOCUMENT AND COUNSEL THE (2) EMPLOYEES WITH THE LOWEST CASH TIP %.
- [ ] THE EDITED PUNCH LIST MUST BE SIGNED BY THE EMPLOYEE WHO'S TIME IS BEING ADJUSTED AND MANAGER & RETAINED 3 YEARS.
- [ ] EDITED PUNCH LIST MUST REFLECT ACCURATE JOB CODE, TIME IN/OUT, RATE OF PAY, AND TIP DECLARATION.
- [ ] PAYROLL CHECKS MUST BE DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL IN THE ENVELOPE PROVIDED.

COMMENTS: \_\_\_\_\_

TOTAL PTS.

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_



GRADING ADMINISTRATIVE PROCEDURESRECOMMENDATIONS

1. EMPLOYEE FILES SHOULD INCLUDE THE FOLLOWING:

- ORIENTATION CHECKLIST SIGNED BY THE EMPLOYEE AND MANAGEMENT
- ASSOCIATE APPLICATION FOR EMPLOYMENT
- DRUG & ALCOHOL FREE WORKPLACE POLICY
- SEXUAL HARASSMENT POLICY AGREEMENT & ZERO TOLERANCE OF SEXUAL HARASSMENT
- HAZARD COMMUNICATION TRAINING
- TIP REPORTING ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS POLICY
- ASSOCIATE CONDITIONS OF EMPLOYMENT

ONE POINT FOR EACH PERCENTAGE POINT.

— PTS.

2. *0\** EMPLOYEE FILES NOT RETAINED FOR 3 FULL YEARS FROM TERMINATION.  
50 PTS.

- EMPLOYEE FILES MUST INCLUDE ALL OF THE FOLLOWING DOCUMENTS COMPLETED:

- ORIENTATION CHECKLIST SIGNED BY THE EMPLOYEE AND MANAGEMENT
- ASSOCIATE APPLICATION FOR EMPLOYMENT
- DRUG & ALCOHOL FREE WORKPLACE POLICY
- SEXUAL HARASSMENT POLICY AGREEMENT & ZERO TOLERANCE OF SEXUAL HARASSMENT
- HAZARD COMMUNICATION TRAINING
- TIP REPORTING ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS POLICY
- ASSOCIATE CONDITIONS OF EMPLOYMENT

- [ ] RETENTION FOR EMPLOYEE FILES IS 3 FULL YEARS FROM TERMINATION.

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: 1.) Majority of

employee files do not  
contain Assoc. Admin.  
Forms & Sig. doc.

- SEE Attached -

GRADING LIQUOR REPORTS

1. LIQUOR, BEER, & WINE INVOICES NOT RETAINED FOR AT LEAST TWO YEARS (TEXAS = FOUR YEARS).  
30 PTS.
2. EMPLOYEES WITHOUT LIQUOR PERMITS.  
PASS/FAIL

RECOMMENDATIONS

- ☐ LIQUOR, BEER, & WINE INVOICES ARE TO BE RETAINED A MINIMUM OF TWO YEARS (TEXAS = FOUR YEARS).
- ☐ IN THOSE RESTAURANTS WHERE IT IS A REQUIREMENT, ALL SERVERS & BARTENDERS ARE REQUIRED TO HAVE A LIQUOR PERMIT.

TEXAS ONLY

1. PMIX RETAINED FOR AT LEAST FOUR YEARS.  
30 PTS.
2. POOL FUND NOT COMPLETED IN FULL & RETAINED FOUR YEARS.  
*This includes Pool Fund Financials from Corporate Office and the Manual Calculation done by store Manager.*  
(TEXAS PRIVATE CLUB ONLY).  
30 PTS.
3. 30% REPLACEMENT STAMP NOT USED ON PMIX REPORT OR BAR TAPE (TEXAS PRIVATE CLUB ONLY).  
10 PTS.

- ☐ PMIX REPORTS ARE TO BE RETAINED A MINIMUM OF FOUR YEARS

- ☐ THE POOL FUND LOG IS TO BE FULLY COMPLETED & RETAINED FOUR YEARS (TEXAS PRIVATE CLUB ONLY).

- ☐ THE 30% REPLACEMENT STAMP IS TO BE USED ON ALL PMIX REPORTS OR BAR JOURNALS IN TEXAS PRIVATE CLUBS.

4. "FELONY FOR WEAPONS POSTER" AND "TABC HOTLINE" POSTERS IN BAR AREA OF ALL TEXAS RESTAURANTS.  
YES NO

- ☐ IN ORDER TO SATISFY TABC REQUIREMENTS, BOTH POSTERS MUST BE POSTED IN THE BAR AREA OF ALL TEXAS RESTAURANTS.

5. EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE.  
50 PTS.

- ☒ EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE

6. TABC LIQUOR STAMP  
20 PTS.

- ☒ ALL LIQUOR BOTTLES MUST HAVE A TABC LIQUOR STAMP.

7. LIQUOR CHECKS NOT RETAINED FOR A PERIOD OF ONE (1) YEAR.  
25 PTS.

- ☐ LIQUOR CHECKS MUST BE RETAINED FOR A PERIOD OF ONE (1) YEAR.

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

5. COMMENTS: TABC CERT.

M. Kuczynski - expired

B. P. B. - expired

6

6. (1) Bottle (Louis VIII) NO TABC STAMP  
3799

GRADING UNIT SECURITYRECOMMENDATIONS

- ① FRONT, REAR, AND SIDE ENTRIES UNLOCKED DURING NON-OPERATING HOURS, OR THE KITCHEN DOOR LEFT OPEN WITH NO MANAGER PRESENT. 50 PTS.
2. *OK* OFFICE DOOR LEFT OPEN OR UNLOCKED. 25 PTS.
3. *N/A* DETEX ALARM OR PANIC BAR NOT ARMED. 25 PTS.
4. *OK* SAFE UNLOCKED (DAY LOCK). 50 PTS.
5. *OK* CASH IN ANY REGISTER DRAWER IN EXCESS OF \$500 OVER BEGINNING BANK. CASH IN ANY OFFICE DRAWER IN EXCESS OF \$500. 50 PTS.

- [ ☒ ] ALL ENTRY DOORS MUST REMAIN LOCKED DURING NON-OPERATING HOURS.
- [ ☐ ] THE KITCHEN DOOR MUST NEVER REMAIN OPEN UNLESS A MANAGER IS PRESENT.
- [ ☐ ] THE OFFICE DOOR SHOULD REMAIN CLOSED & LOCKED AT ALL TIMES.
- [ ☐ ] THE DETEX ALARM OR PANIC BAR SHOULD BE ARMED UNLESS A MANAGER IS PRESENT.
- [ ☐ ] THE SAFE MUST REMAIN LOCKED AT ALL TIMES UNLESS A MANAGER IS CONDUCTING BUSINESS FROM IT.
- [ ☐ ] CASH IN THE REGISTER DRAWER SHOULD BE KEPT TO A MINIMUM. CASH IN OFFICE DRAWER SHOULD BE KEPT TO A MINIMUM.

TOTAL PTS.

COMMENTS: \_\_\_\_\_

SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

1.) *area Kitchen door left open for employee entry/delivery 2:50 pm no mgr. present.*

\_\_\_\_\_

\_\_\_\_\_

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EMPLOYEE I-9 FORMS & PROCEDURESRECOMMENDATIONS

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>① NO GM INITIALS IN THE UPPER RIGHT HAND CORNER.<br/>5 PTS. EACH.</p> <p>2. <i>OK</i> EMPLOYEES WITHOUT AN I-9 ON FILE.<br/>30 PTS.</p> <p>3. <i>OK</i> EMPLOYEES WITH INCOMPLETE FORMS.<br/>15 PTS.</p> <p>4. <i>OK</i> EMPLOYEES WITH EXPIRED EMPLOYMENT AUTHORIZATION.<br/>15 PTS.</p> <p>5. <i>OK</i> CURRENT EMPLOYEE I-9'S NOT PROPERLY RETAINED.<br/>20 PTS.</p> <p>6. <i>OK</i> TERMINATED BINDERS NOT PROPERLY RETAINED.<br/>20 PTS.</p> <p>7. <i>OK</i> I-9 GUIDEBOOK NOT SIGNED.<br/>0 PTS.</p> | <p>[ <input checked="" type="checkbox"/> ] THE GM MUST VERIFY EVERY I-9 &amp; INITIAL IN THE UPPER RIGHT HAND CORNER.</p> <p>[ ] ALL EMPLOYEES HIRED AFTER 11/06/86 MUST HAVE AN I-9 ON FILE BEFORE BEGINNING WORK.</p> <p>[ ] ALL I-9'S MUST BE COMPLETED IN FULL.</p> <p>[ ] ALL INS EMPLOYMENT AUTHORIZATIONS MUST HAVE A FUTURE EXPIRATION DATE.</p> <p>[ ] CURRENT EMPLOYEE I-9'S MUST BE RETAINED IN A 3-RING BINDER IN ALPHABETICAL ORDER.</p> <p>[ ] TERMINATED I-9'S MUST BE RETAINED ALPHABETICALLY IN A 3-RING BINDER, LABELED &amp; STORED AT THE END OF EACH CALENDAR YEAR.</p> <p>[ ] ALL MANAGEMENT &amp; HOURLY EMPLOYEES WHO COMPLETE I-9'S AS A REPRESENTATIVE MUST SIGN THE I-9 GUIDEBOOK.</p> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

TOTAL PTS.

COMMENTS: \_\_\_\_\_

SCALE

100-90 = A  
 89-80 = B  
 79-70 = C  
 69-60 = D  
 BELOW 60 = F

-5 E. GERMINARIO - No mgm. initialPerfect I-9's\$250.00 bonus

LICENSES, PERMITS & POSTERSARE THE FOLLOWING POSTERS UP?

## HUMAN RESOURCES

|                                                                                     |                                         |                             |
|-------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------|
| 5 IN 1 POSTER                                                                       | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| SEXUAL HARASSMENT POLICY<br>(FLORIDA, TEXAS, AND NEW YORK<br>- SPANISH AND ENGLISH) | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| PAYDAY LAW                                                                          | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| STATE COMPLIANCE KIT                                                                | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |

RISK MANAGEMENT POSTERS

|                                                                     |                                         |                                        |
|---------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| MEDICAL PROVIDER LISTING                                            | YES <input type="checkbox"/>            | NO <input type="checkbox"/>            |
| MSDS BOOK AND HAZCOMM                                               | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| ACCIDENT/ INCIDENT HOTLINE<br>POSTER IN OFFICE                      | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| MANDATORY FOOTWARE POLICY                                           | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| MANDATORY FLOOR MAT POLICY                                          | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| MANDATORY FLOOR CLEANING<br>PROCEDURES POSTER (MONDAY)              | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| MANDATORY FLOOR CLEANING<br>PROCEDURES POSTER<br>(TUESDAY - SUNDAY) | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| THE RIGHT TOOLS POSTER                                              | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| NOTICE TO EMPLOYEES CONCERNING<br>WORKERS' COMPENSATION IN TEXAS    | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| NOTICE TO WORKERS' COMPENSATION<br>ALL OTHER STATES                 | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| TEXAS PAYDAY NOTICE (ENGLISH AND<br>SPANISH)                        | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| CHOKING POSTER (ENGLISH AND<br>SPANISH)                             | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |

ARE EMPLOYEES WEARING NON-SKID  
SOLE SHOES?

YES \_\_\_\_\_

NO ✓

FLOOR CONDITION?

EXCELLENT

GOOD

BAD

(circle one)

ARE QUEST DRUG FORMS AVAILABLE?

YES ✓

NO \_\_\_\_\_

## Restaurant Visit Report

To: \_\_\_\_\_  
 From: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Subject: \_\_\_\_\_

| MANAGEMENT TEAM                                        | YES | NO |
|--------------------------------------------------------|-----|----|
| 100% Table Visits by MOD                               |     |    |
| Managers and Associates use Confident Speak            |     |    |
| Crisp, Logo Uniform, name tag                          |     |    |
| STANDARDIZED TRAINING                                  |     |    |
| Server Training Packet used, Tests in Files            |     |    |
| Alley Rallies happening 2x a day                       |     |    |
| Manager Meetings 1 per week, with notes                |     |    |
| CT's for all departments, certificates hung            |     |    |
| Flip Charts used for all training                      |     |    |
| Best Practices followed, managers carrying focus cards |     |    |
| STEPS OF SERVICE HIT                                   |     |    |
| Service is friendly, all employees smiling             |     |    |
| Steps of Service nailed                                |     |    |
| Fast Check and Change; lunch within 2 minutes          |     |    |
| Thank You on every guest check                         |     |    |
| Server contests in place, results posted               |     |    |
| Server scripting nailed                                |     |    |
| Leather feature tents used properly                    |     |    |
| Current PEA's posted                                   |     |    |
| All menu covers pristine, enough on hand               |     |    |
| Proper POP on all tables                               |     |    |
| PROPER HOST GREET/SALUTATION                           |     |    |
| Guests get a friendly greet, proper script             |     |    |
| Guests thanked and invited to return                   |     |    |
| Proper phone greet, friendly, proper script            |     |    |
| Brilliant restrooms, 10 minute checklist in use        |     |    |
| SAFETY                                                 |     |    |
| Back door, office locked                               |     |    |
| No wet floors, floor mats used                         |     |    |

| CLEAN AND ORGANIZED                                     | YES | NO |
|---------------------------------------------------------|-----|----|
| Cleaning systems, bathroom checks                       |     |    |
| Sanitation Checklist in use                             |     |    |
| All food product is dated                               |     |    |
| All kitchen equipment clean and good repair             |     |    |
| All refrigeration has working thermometer, proper temps |     |    |
| Proper hand washing procedures in place                 |     |    |
| Hot box has working thermometer, at proper temp         |     |    |
| Lighting / music adjusted and working order             |     |    |
| FOH and BOH clean and good repair                       |     |    |
| Proper water supply (hot & cold) drains work properly   |     |    |
| Dish machine, soap, sanitizer, and temps correct        |     |    |
| No food particles on clean plates and utensils          |     |    |
| All food bins labeled, covered and clean                |     |    |
| No evidence of roaches, flies, insects, or rodents      |     |    |
| No cross contamination of food products                 |     |    |
| Toxic items, chemicals, labeled & stored properly       |     |    |
| All landscaping pristine, lights, signage working       |     |    |
| AUDIT                                                   |     |    |
| Employee files complete, Application, NAD, Advisor      |     |    |
| I-9's correct                                           |     |    |
| Orientation checklist signed off by associate & GM      |     |    |
| All servers and bartenders have proper license or cert. |     |    |
| All local food handlers permits on file                 |     |    |

MOD Name \_\_\_\_\_

Inspector Name \_\_\_\_\_

Total Score

Comments:

Revised 05/2004

ALOHA RESTAURANT

TO: Syed Raza  
 FROM: Roy Anderson  
 SUBJECT: RESTAURANT AUDIT  
 DATE: 5/6/05

AUDIT DATE: 4/28/05  
 LAST AUDIT: 11/17/04

cc: M. Camp  
N. Garvey  
R. Weaver

THE AUDIT OF RESTAURANT # 621 RESULTED IN A GRADE OF "A" AS FOLLOWS:

☒ RESPONSE REQUIRED

RESTAURANT VISIT SCORE N/A

GRADING SCHEDULE

| CATEGORIES                      | CURRENT AUDIT     | LAST AUDIT |
|---------------------------------|-------------------|------------|
| 1. DEPOSITS                     | <u>A</u>          | <u>A</u>   |
| 2. ALOHA SECURITY               | <u>A</u>          | <u>B</u>   |
| 3. RESTAURANT ACCOUNTING        | <u>A</u>          | <u>C</u>   |
| 4. SERVER CHECKOUTS & TIP SHARE | <u>A</u>          | <u>A</u>   |
| 5. ADMINISTRATIVE PROCEDURES    | <u>A</u>          | <u>A</u>   |
| 6. LIQUOR REPORTS               | <u>F</u>          | <u>A</u>   |
| 7. UNIT SECURITY                | <u>A</u>          | <u>A</u>   |
| 8. I-9's                        | <u>A</u>          | <u>A</u>   |
| OVERALL GRADE                   | <u>A</u><br>(3.5) | <u>A</u>   |

## OVERALL GRADING SCALE

|     |   |      |   |   |
|-----|---|------|---|---|
| 3.5 | - | 4.0  | = | A |
| 3.0 | - | 3.49 | = | B |
| 2.0 | - | 2.99 | = | C |
| 1.0 | - | 1.99 | = | D |
| 0.0 | - | .99  | = | F |

Area Supervisor N. Garvey

CRITICAL FOUR RESULTS

| Category          | Bonus/Fine          | Total                                                               |
|-------------------|---------------------|---------------------------------------------------------------------|
| Edit Punch        | \$0 / \$50 / -\$100 | _____                                                               |
| Admin. Files      | \$0 / \$50 / -\$100 | _____                                                               |
| Liq. Permits      | \$0 / \$50 / -\$100 | _____                                                               |
| I-9's             | \$0 / \$50 / -\$100 | _____                                                               |
| Total Bonus/Fine  |                     | \$ _____                                                            |
| I-9 BONUS (\$250) |                     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

EXHIBIT

B

3781



GRADING DEPOSITS

1. *OK* DEPOSIT SLIP NOT VERIFIED  
WITH TWO MANAGER'S INITIALS.  
5 PTS. EACH (25 PTS. MAX)
2. *OK* DEPOSIT SLIPS & ARMORED CAR  
RECEIPTS NOT RETAINED 3  
PERIODS.  
5 PTS. EACH (25 PTS. MAX)
3. *OK* DEPOSIT ACCURACY  
25 PTS.
4. *OK* LATE DEPOSITS  
1 LATE = 10 PTS  
2 LATE = 20 PTS  
3 LATE = 50 PTS

RECOMMENDATIONS

- [ ] THE DEPOSIT SHOULD BE VERIFIED  
BY BOTH THE CLOSING & THE OPENING  
MANAGERS & BOTH SHOULD INITIAL THE  
DEPOSIT SLIP.
- [ ] THE RETENTION PERIOD FOR  
DEPOSIT SLIPS & ARMORED CAR RECEIPTS  
IS THREE FULL PERIODS. THEY SHOULD BE  
KEPT SEPARATELY IN DATE ORDER.
- [ ] ALL DEPOSITS MUST BE ACCURATE.  
NO DEPOSIT MAY BE "ROUNDED OFF". ALL CURRENCY,  
COIN AND CHECKS MUST BE LISTED SEPERATELY.
- [ ] DEPOSITS ARE TO BE MADE DAILY PRIOR  
TO 2:00PM.

COMMENTS: \_\_\_\_\_

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TOTAL PTS.

SCALE  
100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F



RESTAURANT ACCOUNTING

DAILY ENVELOPES  
MUST INCLUDE:

- 5 PTS EA. ALOHA SALES REPORT
- 5 PTS EA. CREDIT CARD SLIPS AND EDC TRANSACTION REPORT
- 5 PTS EA. VOID REPORT REVIEWED AND SIGNED BY MANAGEMENT
- 5 PTS EA. AUDIT REPORT REVIEWED AND SIGNED BY MANAGER
- 5 PTS EA. GIFT CERTIFICATES NOT VOIDED AT THE TIME OF REDEMPTION
- 5 PTS EA. DOCUMENTS/RECEIPTS FOR ALL CASH PAIDOUTS

0 PTS.

RECOMMENDATIONS

- [ ] ALL DAILY ENVELOPES MUST BE SUBMITTED TO THE CORPORATE OFFICE.
- [ ] ALL EXPENSES & INCOME SHOWN ON THE DAILY SALES REPORT MUST HAVE BACKUP IN THE DAILY ENVELOPE.
- [ ] THE EDC REPORT MUST BE RUN FOR THE CORRECT DAY'S BUSINESS & PLACED IN THE DAILY ENVELOPE.
- [ ] ALL VOID REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL AUDIT REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL OFF LINE GIFT CERTIFICATES AND VIP CARDS SHOULD BE VOIDED AT THE TIME OF REDEMPTION.
- [ ] SUPPORTING DOCUMENTATION MUST BE INCLUDED IN THE DSR.

COMMENTS: \_\_\_\_\_

TOTAL PTS.

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

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SERVER CHECKOUT, TIP SHARE & EDITED PUNCHES

1. *OK* INFORMATION ON CHECKOUT REPORT IS COMPLETE AND INCLUDES: ALL CREDIT CARD RECEIPTS, ALL GIFT CERTIFICATES AND PROMOTIONAL COUPONS, AND CASH RECEIVED FROM SERVER. 35 PTS.
2. *OK* SERVER CHECKOUT REPORT SIGNED BY MANAGEMENT & RETAINED 3 PERIODS. 30 PTS.
3. *OK* TIP SHARE CALCULATION SHEET RETAINED 3 PERIODS. 25 PTS.
4. *OK* TIP TRAC
5. *OK* EDITED PUNCH LIST NOT RETAINED FOR 3 YEARS AND NOT SIGNED BY EMPLOYEE AND MANAGER. 50 PTS.
6. *OK* EDITED PUNCH ACCURACY REVIEW 20 PTS. PER OCCURANCE
7. *OK* PAYROLL CHECKS NOT DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL. 25 PTS.

RECOMMENDATIONS

- [ ] SERVER CHECKOUTS ARE PERFORMED EACH SHIFT AND REQUIRES MANAGEMENT TO VERIFY SUPPORTING DOCUMENTS PERTAINING TO CHECKOUT SHEET.
- [ ] CORPORATE POLICY STATES THAT SERVER CHECKOUTS BE RETAINED FOR THREE PERIODS AND SIGNED BY MANAGEMENT.
- [ ] TIP SHARE CALCULATION SHEET MUST BE RETAINED FOR 3 PERIODS.
- [ ] ALL EMPLOYEES MUST SIGN TRAC REPORT WHEN RECEIVING PAYROLL CHECK. MANAGER WILL DOCUMENT AND COUNSEL THE (2) EMPLOYEES WITH THE LOWEST CASH TIP %.
- [ ] THE EDITED PUNCH LIST MUST BE SIGNED BY THE EMPLOYEE WHO'S TIME IS BEING ADJUSTED AND MANAGER & RETAINED 3 YEARS.
- [ ] EDITED PUNCH LIST MUST REFLECT ACCURATE JOB CODE, TIME IN/OUT, RATE OF PAY, AND TIP DECLARATION.
- [ ] PAYROLL CHECKS MUST BE DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL IN THE ENVELOPE PROVIDED.

COMMENTS: \_\_\_\_\_

TOTAL PTS.SCALE

100-90 = A  
 89-80 = B  
 79-70 = C  
 69-60 = D  
 BELOW 60 = F

GRADING ADMINISTRATIVE PROCEDURESRECOMMENDATIONS

1. EMPLOYEE FILES SHOULD  
INCLUDE THE FOLLOWING:

- ORIENTATION CHECKLIST  
SIGNED BY THE EMPLOYEE  
AND MANAGEMENT
- ASSOCIATE APPLICATION FOR  
EMPLOYMENT
- DRUG & ALCOHOL FREE  
WORKPLACE POLICY
- SEXUAL HARASSMENT POLICY  
AGREEMENT & ZERO TOLERANCE  
OF SEXUAL HARASSMENT
- HAZARD COMMUNICATION  
TRAINING
- TIP REPORTING  
ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS  
POLICY
- ASSOCIATE CONDITIONS OF  
EMPLOYMENT

ONE POINT FOR EACH PERCENTAGE  
POINT.

0 PTS.

2. *sk* EMPLOYEE FILES NOT RETAINED  
FOR 3 FULL YEARS FROM  
TERMINATION.  
50 PTS.

EMPLOYEE FILES MUST INCLUDE ALL OF  
THE FOLLOWING DOCUMENTS COMPLETED:

- ORENTATION CHEKLIST SIGNED BY  
THE EMPLOYEE AND MANAGEMENT
- ASSOCIATE APPLICATION FOR  
EMPLOYMENT
- DRUG & ALCOHOL FREE WORKPLACE  
POLICY
- SEXUAL HARASSMENT POLICY  
AGREEMENT & ZERO TOLERANCE OF  
SEXUAL HARASSMENT
- HAZARD COMMUNICATION TRAINING
- TIP REPORTING ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS POLICY
- ASSOCIATE CONDITIONS OF  
EMPLOYMENT

[ ] RETENTION FOR EMPLOYEE FILES IS  
3 FULL YEARS FROM TERMINATION.

TOTAL PTS.

COMMENTS: \_\_\_\_\_

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

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GRADING LIQUOR REPORTSRECOMMENDATIONS

1. *OK* LIQUOR, BEER, & WINE INVOICES NOT RETAINED FOR AT LEAST TWO YEARS (TEXAS = FOUR YEARS).  
30 PTS.

- [ ] LIQUOR, BEER, & WINE INVOICES ARE TO BE RETAINED A MINIMUM OF TWO YEARS (TEXAS = FOUR YEARS).

2. EMPLOYEES WITHOUT LIQUOR PERMITS.  
PASS/FAIL

- [ ] IN THOSE RESTAURANTS WHERE IT IS A REQUIREMENT, ALL SERVERS & BARTENDERS ARE REQUIRED TO HAVE A LIQUOR PERMIT.

TEXAS ONLY

1. PMIX RETAINED FOR AT LEAST FOUR YEARS.  
30 PTS.

- [ ] PMIX REPORTS ARE TO BE RETAINED A MINIMUM OF FOUR YEARS

2. POOL FUND NOT COMPLETED IN FULL & RETAINED FOUR YEARS.  
*This includes Pool Fund Financials from Corporate Office and the Manual Calculation done by store Manager.*  
(TEXAS PRIVATE CLUB ONLY).  
30 PTS.

- [ ] THE POOL FUND LOG IS TO BE FULLY COMPLETED & RETAINED FOUR YEARS (TEXAS PRIVATE CLUB ONLY).

3. 30% REPLACEMENT STAMP NOT USED ON PMIX REPORT OR BAR TAPE (TEXAS PRIVATE CLUB ONLY).  
10 PTS.

- [ ] THE 30% REPLACEMENT STAMP IS TO BE USED ON ALL PMIX REPORTS OR BAR JOURNALS IN TEXAS PRIVATE CLUBS.

4. "FELONY FOR WEAPONS POSTER" AND "TABC HOTLINE" POSTERS IN BAR AREA OF ALL TEXAS RESTAURANTS.

- [ ] IN ORDER TO SATISFY TABC REQUIREMENTS, BOTH POSTERS MUST BE POSTED IN THE BAR AREA OF ALL TEXAS RESTAURANTS.

YES NO

5. EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE.  
50 PTS.

- [ ☒ ] EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE

6. *OK* TABC LIQUOR STAMP  
20 PTS.

- [ ] ALL LIQUOR BOTTLES MUST HAVE A TABC LIQUOR STAMP.

7. *OK* LIQUOR CHECKS NOT RETAINED FOR A PERIOD OF ONE (1) YEAR.  
25 PTS.

- [ ] LIQUOR CHECKS MUST BE RETAINED FOR A PERIOD OF ONE (1) YEAR.

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: TABC Cert.

Speed Raza - no card so like



EMPLOYEE I-9 FORMS & PROCEDURESRECOMMENDATIONS

- |              |                                                                |     |                                                                                                                         |
|--------------|----------------------------------------------------------------|-----|-------------------------------------------------------------------------------------------------------------------------|
| 1. <i>JK</i> | NO GM INITIALS IN THE UPPER RIGHT HAND CORNER.<br>5 PTS. EACH. | [ ] | THE GM MUST VERIFY EVERY I-9 & INITIAL IN THE UPPER RIGHT HAND CORNER.                                                  |
| 2. <i>JK</i> | EMPLOYEES WITHOUT AN I-9 ON FILE.<br>30 PTS.                   | [ ] | ALL EMPLOYEES HIRED AFTER 11/06/86 MUST HAVE AN I-9 ON FILE BEFORE BEGINNING WORK.                                      |
| 3. <i>JK</i> | EMPLOYEES WITH INCOMPLETE FORMS.<br>15 PTS.                    | [ ] | ALL I-9'S MUST BE COMPLETED IN FULL.                                                                                    |
| 4. <i>OK</i> | EMPLOYEES WITH EXPIRED EMPLOYMENT AUTHORIZATION.<br>15 PTS.    | [ ] | ALL INS EMPLOYMENT AUTHORIZATIONS MUST HAVE A FUTURE EXPIRATION DATE.                                                   |
| 5. <i>OK</i> | CURRENT EMPLOYEE I-9'S NOT PROPERLY RETAINED.<br>20 PTS.       | [ ] | CURRENT EMPLOYEE I-9'S MUST BE RETAINED IN A 3-RING BINDER IN ALPHABETICAL ORDER.                                       |
| 6. <i>OK</i> | TERMINATED BINDERS NOT PROPERLY RETAINED.<br>20 PTS.           | [ ] | TERMINATED I-9'S MUST BE RETAINED ALPHABETICALLY IN A 3-RING BINDER, LABELED & STORED AT THE END OF EACH CALENDAR YEAR. |
| 7. <i>OK</i> | I-9 GUIDEBOOK NOT SIGNED.<br>0 PTS.                            | [ ] | ALL MANAGEMENT & HOURLY EMPLOYEES WHO COMPLETE I-9'S AS A REPRESENTATIVE MUST SIGN THE I-9 GUIDEBOOK.                   |

TOTAL PTS.

COMMENTS: \_\_\_\_\_

SCALE

100-90 = A  
 89-80 = B  
 79-70 = C  
 69-60 = D  
 BELOW 60 = F

A

( NO BONUS )

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8



LICENSES, PERMITS & POSTERSARE THE FOLLOWING POSTERS UP?

## HUMAN RESOURCES

|                                                                                     |          |         |
|-------------------------------------------------------------------------------------|----------|---------|
| 5 IN 1 POSTER                                                                       | YES_____ | NO_____ |
| SEXUAL HARASSMENT POLICY<br>(FLORIDA, TEXAS, AND NEW YORK<br>- SPANISH AND ENGLISH) | YES_____ | NO_____ |
| PAYDAY LAW                                                                          | YES_____ | NO_____ |
| STATE COMPLIANCE KIT                                                                | YES_____ | NO_____ |

RISK MANAGEMENT POSTERS

|                                                                     |          |         |
|---------------------------------------------------------------------|----------|---------|
| MEDICAL PROVIDER LISTING                                            | YES_____ | NO_____ |
| MSDS BOOK AND HAZCOMM                                               | YES_____ | NO_____ |
| ACCIDENT/ INCIDENT HOTLINE<br>POSTER IN OFFICE                      | YES_____ | NO_____ |
| MANDATORY FOOTWARE POLICY                                           | YES_____ | NO_____ |
| MANDATORY FLOOR MAT POLICY                                          | YES_____ | NO_____ |
| MANDATORY FLOOR CLEANING<br>PROCEDURES POSTER (MONDAY)              | YES_____ | NO_____ |
| MANDATORY FLOOR CLEANING<br>PROCEDURES POSTER<br>(TUESDAY - SUNDAY) | YES_____ | NO_____ |
| THE RIGHT TOOLS POSTER                                              | YES_____ | NO_____ |
| NOTICE TO EMPLOYEES CONCERNING<br>WORKERS' COMPENSATION IN TEXAS    | YES_____ | NO_____ |
| NOTICE TO WORKERS' COMPENSATION<br>ALL OTHER STATES                 | YES_____ | NO_____ |
| TEXAS PAYDAY NOTICE (ENGLISH AND<br>SPANISH)                        | YES_____ | NO_____ |
| CHOKING POSTER (ENGLISH AND<br>SPANISH)                             | YES_____ | NO_____ |

ARE EMPLOYEES WEARING NON-SKID  
SOLE SHOES?

YES\_\_\_\_\_ NO\_\_\_\_\_

FLOOR CONDITION?

EXCELLENT GOOD BAD (circle one)

ARE QUEST DRUG FORMS AVAILABLE?

YES\_\_\_\_\_ NO\_\_\_\_\_

# Restaurant Visit Report

To: \_\_\_\_\_  
 From: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Subject: \_\_\_\_\_

N/A

| MANAGEMENT TEAM                                        | YES | NO |
|--------------------------------------------------------|-----|----|
| 100% Table Visits by MOD                               |     |    |
| Managers and Associates use Confident Speak            |     |    |
| Crisp, Logo Uniform, name tag                          |     |    |
| <b>STANDARDIZED TRAINING</b>                           |     |    |
| Server Training Packet used, Tests in Files            |     |    |
| Alley Rallies happening 2x a day                       |     |    |
| Manager Meetings 1 per week, with notes                |     |    |
| CT's for all departments, certificates hung            |     |    |
| Flip Charts used for all training                      |     |    |
| Best Practices followed, managers carrying focus cards |     |    |
| <b>STEPS OF SERVICE HIT</b>                            |     |    |
| Service is friendly, all employees smiling             |     |    |
| Steps of Service nailed                                |     |    |
| Fast Check and Change; lunch within 2 minutes          |     |    |
| Thank You on every guest check                         |     |    |
| Server contests in place, results posted               |     |    |
| Server scripting nailed                                |     |    |
| Leather feature tents used properly                    |     |    |
| Current PEA's posted                                   |     |    |
| All menu covers pristine, enough on hand               |     |    |
| Proper POP on all tables                               |     |    |
| <b>PROPER HOST GREET/SALUTATION</b>                    |     |    |
| Guests get a friendly greet, proper script             |     |    |
| Guests thanked and invited to return                   |     |    |
| Proper phone greet, friendly, proper script            |     |    |
| Brilliant restrooms, 10 minute checklist in use        |     |    |
| <b>SAFETY</b>                                          |     |    |
| Back door, office locked                               |     |    |
| No wet floors, floor mats used                         |     |    |

| CLEAN AND ORGANIZED                                     | YES | NO |
|---------------------------------------------------------|-----|----|
| <b>Cleaning systems, bathroom checks</b>                |     |    |
| Sanitation Checklist in use                             |     |    |
| All food product is dated                               |     |    |
| All kitchen equipment clean and good repair             |     |    |
| All refrigeration has working thermometer, proper temps |     |    |
| Proper hand washing procedures in place                 |     |    |
| Hot box has working thermometer, at proper temp         |     |    |
| Lighting / music adjusted and working order             |     |    |
| FOH and BOH clean and good repair                       |     |    |
| Proper water supply (hot & cold) drains work properly   |     |    |
| Dish machine, soap, sanitizer, and temps correct        |     |    |
| No food particles on clean plates and utensils          |     |    |
| All food bins labeled, covered and clean                |     |    |
| No evidence of roaches, flies, insects, or rodents      |     |    |
| No cross contamination of food products                 |     |    |
| Toxic items, chemicals, labeled & stored properly       |     |    |
| All landscaping pristine, lights, signage working       |     |    |
| <b>AUDIT</b>                                            |     |    |
| Employee files complete, Application, NAD, Advisor      |     |    |
| I-9's correct                                           |     |    |
| Orientation checklist signed off by associate & GM      |     |    |
| All servers and bartenders have proper license or cert. |     |    |
| All local food handlers permits on file                 |     |    |

MOD Name \_\_\_\_\_

Inspector Name \_\_\_\_\_

**Total Score**

**Comments:**

DECLARATION OF CLAYTON KILLAM

1. My name is Clayton Killam. I am over 21 years old and am in all ways competent to make this declaration. I am the Senior Director of Internal Audit for Consolidated Restaurant Operations, Inc. ("CRO"). I have never been convicted of a felony or misdemeanor involving moral turpitude. I have personal knowledge of the facts stated herein and affirm that they are all true and correct.
2. I have been Senior Director of Internal Audit since 2003. In my capacity as Senior Director of Internal Audit, one of my responsibilities was auditing restaurants to ensure compliance with CRO policies.
3. On January 25, 2007, March 20, 2008, April 22, 2009, and April 19, 2010, I audited the Silver Fox restaurant in Fort Worth. A true and correct copy of my audit notes for the 2007 audit is attached hereto as Exhibit A. A true and correct copy of my audit notes for 2008 audit is attached hereto as Exhibit B. A true and correct copy of my audit notes for 2009 is attached hereto as Exhibit C. A true and correct copy of my audit notes for 2010 is attached hereto as Exhibit D.
4. At each audit, I checked to ensure that the federal "5-in-1" poster was posted in the Silver Fox restaurant. It was located in the area where servers pick up food from the kitchen, right outside the office, clearly visible to all restaurant staff. The poster informed employees of the minimum wage at the time of the audit.
5. I ensured that the poster was current and contained the correct minimum wage provision at each audit. At each audit, I marked off each item with a checklist.

I declare under penalty of perjury that the foregoing is true and correct. \*

  
\_\_\_\_\_  
CLAYTON KILLAM, DECLARANT



Revised 01/2005

ALOHA RESTAURANT

TO: ASIT Raza  
 FROM: Clayton Kellan  
 SUBJECT: RESTAURANT AUDIT  
 DATE: 1-25-07

AUDIT DATE: 1-25-07  
 LAST AUDIT: 4-28-05

cc: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

THE AUDIT OF RESTAURANT # 621 RESULTED IN A GRADE OF "A" AS FOLLOWS:

☐ RESPONSE REQUIRED

RESTAURANT VISIT SCORE N/A

GRADING SCHEDULE

| CATEGORIES                      | CURRENT AUDIT | LAST AUDIT |
|---------------------------------|---------------|------------|
| 1. DEPOSITS                     | <u>A</u>      | <u>A</u>   |
| 2. ALOHA SECURITY               | <u>A</u>      | <u>A</u>   |
| 3. RESTAURANT ACCOUNTING        | <u>A</u>      | <u>A</u>   |
| 4. SERVER CHECKOUTS & TIP SHARE | <u>A</u>      | <u>A</u>   |
| 5. ADMINISTRATIVE PROCEDURES    | <u>A</u>      | <u>A</u>   |
| 6. LIQUOR REPORTS               | <u>A</u>      | <u>F</u>   |
| 7. UNIT SECURITY                | <u>A</u>      | <u>A</u>   |
| 8. I-9's                        | <u>A</u>      | <u>A</u>   |
| OVERALL GRADE                   | <u>A</u>      | <u>A</u>   |

## OVERALL GRADING SCALE

3.5 - 4.0 = A

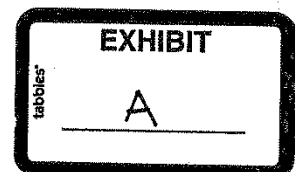
3.0 - 3.49 = B

2.0 - 2.99 = C

1.0 - 1.99 = D

0.0 - .99 = F

| Area Supervisor <u>Nick Garvey</u> |                     |                                                                     |
|------------------------------------|---------------------|---------------------------------------------------------------------|
| <b>CRITICAL FOUR RESULTS</b>       |                     |                                                                     |
| Category                           | Bonus/Fine          | Total                                                               |
| Edit Punch                         | \$0 / \$50 / -\$100 | _____                                                               |
| Admin. Files                       | \$0 / \$50 / -\$100 | _____                                                               |
| Liq. Permits                       | \$0 / \$50 / -\$100 | _____                                                               |
| I-9's                              | \$0 / \$50 / -\$100 | _____                                                               |
| Total Bonus/Fine                   |                     | \$ _____                                                            |
| I-9 BONUS (\$250)                  |                     | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| TABC BONUS (\$250)                 |                     | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |



3805

GRADING DEPOSITS

1. DEPOSIT SLIP NOT VERIFIED  
WITH TWO MANAGER'S INITIALS.  
5 PTS. EACH (25 PTS. MAX)
2. DEPOSIT SLIPS & ARMORED CAR  
RECEIPTS NOT RETAINED 3  
PERIODS.  
5 PTS. EACH (25 PTS. MAX)
3. DEPOSIT ACCURACY  
25 PTS.
4. LATE DEPOSITS  
1 LATE = 10 PTS  
2 LATE = 20 PTS  
3 LATE = 50 PTS

RECOMMENDATIONS

- [ ] THE DEPOSIT SHOULD BE VERIFIED  
BY BOTH THE CLOSING & THE OPENING  
MANAGERS & BOTH SHOULD INITIAL THE  
DEPOSIT SLIP.
- [ ] THE RETENTION PERIOD FOR  
DEPOSIT SLIPS & ARMORED CAR RECEIPTS  
IS THREE FULL PERIODS. THEY SHOULD BE  
KEPT SEPARATELY IN DATE ORDER.
- [ ] ALL DEPOSITS MUST BE ACCURATE.  
NO DEPOSIT MAY BE "ROUNDED OFF". ALL CURRENCY,  
COIN AND CHECKS MUST BE LISTED SEPERATELY.
- [ ] DEPOSITS ARE TO BE MADE DAILY PRIOR  
TO 2:00PM.

COMMENTS: Deposit must be  
in Bank Daily.

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

## RECOMMENDATIONS

- |    |                                                                           |     |                                                                                                             |
|----|---------------------------------------------------------------------------|-----|-------------------------------------------------------------------------------------------------------------|
| 1. | MANAGERS NOT USING<br>SWIPE CARDS AT TERMINALS.<br>40 PTS.                | [ ] | SWIPE CARDS MUST BE USED AS A<br>SECURITY MEASURE AGAINST THEFT.                                            |
| 2. | MUST USE MAG CARD BOX<br>BOX - NOT CHECKED.<br>10 PTS EACH. (40 PTS. MAX) | [ ] | ALL EMPLOYEES WHO HAVE ACCESS<br>TO THE ALOHA SYSTEM MUST USE MAG CARDS<br>WHEN ACCESSING THE ALOHA SYSTEM. |
| 3. | CREDIT CARD BATCHES NOT<br>SETTLED ON A DAILY BASIS.<br>25 PTS. EACH      | [ ] | CREDIT CARD BATCHED MUST BE<br>SETTLED AT THE END OF EACH DAY'S<br>BUSINESS.                                |
| 4. | ALOHA EMPLOYEE ACCESS<br>20 PTS.                                          | [ ] | ALOHA EMPLOYEE ACCESS LIST<br>MUST BE CURRENT AND MATCH THE ACTIVE EMPLOYEE<br>ROSTER.                      |

COMMENTS: \_\_\_\_\_

[illegible]

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

RESTAURANT ACCOUNTINGRECOMMENDATIONSDAILY ENVELOPES  
MUST INCLUDE:

- 5 PTS EA. ALOHA SALES REPORT
- 5 PTS EA. CREDIT CARD SLIPS AND EDC TRANSACTION REPORT
- 5 PTS EA. VOID REPORT REVIEWED AND SIGNED BY MANAGEMENT
- 5 PTS EA. AUDIT REPORT REVIEWED AND SIGNED BY MANAGER
- 5 PTS EA. GIFT CERTIFICATES NOT VOIDED AT THE TIME OF REDEMPTION
- 5 PTS EA. DOCUMENTS/RECEIPTS FOR ALL CASH PAIDOUTS

- [ ] ALL DAILY ENVELOPES MUST BE SUBMITTED TO THE CORPORATE OFFICE.
- [ ] ALL EXPENSES & INCOME SHOWN ON THE DAILY SALES REPORT MUST HAVE BACKUP IN THE DAILY ENVELOPE.
- [ ] THE EDC REPORT MUST BE RUN FOR THE CORRECT DAY'S BUSINESS & PLACED IN THE DAILY ENVELOPE.
- [ ] ALL VOID REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL AUDIT REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL OFF LINE GIFT CERTIFICATES AND VIP CARDS SHOULD BE VOIDED AT THE TIME OF REDEMPTION.
- [ ] SUPPORTING DOCUMENTATION MUST BE INCLUDED IN THE DSR.

\_\_\_\_\_PTS.

*100.*

COMMENTS: \_\_\_\_\_

TOTAL PTS.SCALE

100-90 = A  
 89-80 = B  
 79-70 = C  
 69-60 = D  
 BELOW 60 = F



SERVER CHECKOUT, TIP SHARE &  
EDITED PUNCHESRECOMMENDATIONS

- |                                                                                                                                                                               |                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. INFORMATION ON CHECKOUT REPORT IS COMPLETE AND INCLUDES: ALL CREDIT CARD RECEIPTS, ALL GIFT CERTIFICATES AND PROMOTIONAL COUPONS, AND CASH RECEIVED FROM SERVER. 35 PTS. ✓ | [ ] SERVER CHECKOUTS ARE PERFORMED EACH SHIFT AND REQUIRES MANAGEMENT TO VERIFY SUPPORTING DOCUMENTS PERTAINING TO CHECKOUT SHEET.                    |
| 2. SERVER CHECKOUT REPORT SIGNED BY MANAGEMENT & RETAINED 3 PERIODS. 30 PTS. ✓                                                                                                | [ ] CORPORATE POLICY STATES THAT SERVER CHECKOUTS BE RETAINED FOR THREE PERIODS AND SIGNED BY MANAGEMENT.                                             |
| 3. TIP SHARE CALCULATION SHEET RETAINED 3 PERIODS. 25 PTS. <i>per file</i>                                                                                                    | [ ] TIP SHARE CALCULATION SHEET MUST BE RETAINED FOR 3 PERIODS.                                                                                       |
| 4. TIP TRAC ✓                                                                                                                                                                 | [ ] ALL EMPLOYEES MUST SIGN TRAC REPORT WHEN RECEIVING PAYROLL CHECK. MANAGER WILL DOCUMENT AND COUNSEL THE (2) EMPLOYEES WITH THE LOWEST CASH TIP %. |
| 5. EDITED PUNCH LIST NOT RETAINED FOR 3 YEARS AND NOT SIGNED BY EMPLOYEE AND MANAGER. 50 PTS. ✓                                                                               | [ ] THE EDITED PUNCH LIST MUST BE SIGNED BY THE EMPLOYEE WHO'S TIME IS BEING ADJUSTED AND MANAGER & RETAINED 3 YEARS.                                 |
| 6. EDITED PUNCH ACCURACY REVIEW 20 PTS. PER OCCURANCE ✓                                                                                                                       | [ ] EDITED PUNCH LIST MUST REFLECT ACCURATE JOB CODE, TIME IN/OUT, RATE OF PAY, AND TIP DECLARATION.                                                  |
| 7. PAYROLL CHECKS NOT DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL. 25 PTS. ✓                                                                                    | [ ] PAYROLL CHECKS MUST BE DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL IN THE ENVELOPE PROVIDED.                                        |

COMMENTS: \_\_\_\_\_

TOTAL PTS.SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

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GRADING ADMINISTRATIVE PROCEDURESRECOMMENDATIONS

1. EMPLOYEE FILES SHOULD  
INCLUDE THE FOLLOWING:

- ORIENTATION CHECKLIST  
SIGNED BY THE EMPLOYEE  
AND MANAGEMENT
- ASSOCIATE APPLICATION FOR  
EMPLOYMENT
- DRUG & ALCOHOL FREE  
WORKPLACE POLICY
- SEXUAL HARASSMENT POLICY  
AGREEMENT & ZERO TOLERANCE  
OF SEXUAL HARASSMENT
- HAZARD COMMUNICATION  
TRAINING
- TIP REPORTING  
ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS  
POLICY
- ASSOCIATE CONDITIONS OF  
EMPLOYMENT

ONE POINT FOR EACH PERCENTAGE  
POINT.

\_\_\_\_PTS. *100*

2. EMPLOYEE FILES NOT RETAINED  
FOR 3 FULL YEARS FROM  
TERMINATION.  
50 PTS.

EMPLOYEE FILES MUST INCLUDE ALL OF  
THE FOLLOWING DOCUMENTS COMPLETED:

- ORIENTATION CHECKLIST SIGNED BY  
THE EMPLOYEE AND MANAGEMENT
- ASSOCIATE APPLICATION FOR  
EMPLOYMENT
- DRUG & ALCOHOL FREE WORKPLACE  
POLICY
- SEXUAL HARASSMENT POLICY  
AGREEMENT & ZERO TOLERANCE OF  
SEXUAL HARASSMENT
- HAZARD COMMUNICATION TRAINING
- TIP REPORTING ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS POLICY
- ASSOCIATE CONDITIONS OF  
EMPLOYMENT

[ ] RETENTION FOR EMPLOYEE FILES IS  
3 FULL YEARS FROM TERMINATION.

TOTAL PTS.

COMMENTS: \_\_\_\_\_

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

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\_\_\_\_\_  
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\_\_\_\_\_

GRADING LIQUOR REPORTS

1. LIQUOR, BEER, & WINE INVOICES NOT RETAINED FOR AT LEAST TWO YEARS (TEXAS = FOUR YEARS).  
30 PTS.

2. EMPLOYEES WITHOUT LIQUOR PERMITS. PASS/FAIL *100*

RECOMMENDATIONS

- [ ] LIQUOR, BEER, & WINE INVOICES ARE TO BE RETAINED A MINIMUM OF TWO YEARS (TEXAS = FOUR YEARS).

- [ ] IN THOSE RESTAURANTS WHERE IT IS A REQUIREMENT, ALL SERVERS & BARTENDERS ARE REQUIRED TO HAVE A LIQUOR PERMIT.

TEXAS ONLY

1. PMIX RETAINED FOR AT LEAST FOUR YEARS.  
30 PTS.

- [ ] PMIX REPORTS ARE TO BE RETAINED A MINIMUM OF FOUR YEARS

2. POOL FUND NOT COMPLETED IN FULL & RETAINED FOUR YEARS.  
*This includes Pool Fund Financials from Corporate Office and the Manual Calculation done by store Manager.*  
(TEXAS PRIVATE CLUB ONLY).  
30 PTS.

- [ ] THE POOL FUND LOG IS TO BE FULLY COMPLETED & RETAINED FOUR YEARS (TEXAS PRIVATE CLUB ONLY).

3. 30% REPLACEMENT STAMP NOT USED ON PMIX REPORT OR BAR TAPE (TEXAS PRIVATE CLUB ONLY).  
10 PTS.

- [ ] THE 30% REPLACEMENT STAMP IS TO BE USED ON ALL PMIX REPORTS OR BAR JOURNALS IN TEXAS PRIVATE CLUBS.

4. "FELONY FOR WEAPONS POSTER" AND "TABC HOTLINE" POSTERS IN BAR AREA OF ALL TEXAS RESTAURANTS.  
YES NO

- [ ] IN ORDER TO SATISFY TABC REQUIREMENTS, BOTH POSTERS MUST BE POSTED IN THE BAR AREA OF ALL TEXAS RESTAURANTS.

5. EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE.  
50 PTS.

- [ ] EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE

6. TABC LIQUOR STAMP  
20 PTS.

- [ ] ALL LIQUOR BOTTLES MUST HAVE A TABC LIQUOR STAMP.

7. LIQUOR CHECKS NOT RETAINED FOR A PERIOD OF ONE (1) YEAR.  
25 PTS.

- [ ] LIQUOR CHECKS MUST BE RETAINED FOR A PERIOD OF ONE (1) YEAR.

TOTAL PTS.

COMMENTS: \_\_\_\_\_

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6

GRADING UNIT SECURITYRECOMMENDATIONS

- |                                                                                                                                        |                                                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| 1. FRONT, REAR, AND SIDE ENTRIES UNLOCKED DURING NON-OPERATING HOURS, OR THE KITCHEN DOOR LEFT OPEN WITH NO MANAGER PRESENT. 50 PTS. ✓ | [ ] ALL ENTRY DOORS MUST REMAIN LOCKED DURING NON-OPERATING HOURS.                                              |
| 2. OFFICE DOOR LEFT OPEN OR UNLOCKED. 25 PTS. ✓                                                                                        | [ ] THE KITCHEN DOOR MUST NEVER REMAIN OPEN UNLESS A MANAGER IS PRESENT.                                        |
| 3. DETEX ALARM OR PANIC BAR NOT ARMED. 25 PTS. ✓                                                                                       | [ ] THE OFFICE DOOR SHOULD REMAIN CLOSED & LOCKED AT ALL TIMES.                                                 |
| 4. SAFE UNLOCKED (DAY LOCK). 50 PTS. ✓                                                                                                 | [ ] THE DETEX ALARM OR PANIC BAR SHOULD BE ARMED UNLESS A MANAGER IS PRESENT.                                   |
| 5. CASH IN ANY REGISTER DRAWER IN EXCESS OF \$500 OVER BEGINNING BANK. CASH IN ANY OFFICE DRAWER IN EXCESS OF \$500. 50 PTS. ✓         | [ ] THE SAFE MUST REMAIN LOCKED AT ALL TIMES UNLESS A MANAGER IS CONDUCTING BUSINESS FROM IT.                   |
|                                                                                                                                        | [ ] CASH IN THE REGISTER DRAWER SHOULD BE KEPT TO A MINIMUM. CASH IN OFFICE DRAWER SHOULD BE KEPT TO A MINIMUM. |

TOTAL PTS.

COMMENTS: \_\_\_\_\_

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F



LICENSES, PERMITS & POSTERSARE THE FOLLOWING POSTERS UP?

## HUMAN RESOURCES

5 IN 1 POSTER

YES ☒ NO ☐SEXUAL HARASSMENT POLICY  
(ENGLISH AND SPANISH)YES ☒ NO ☐

PAYDAY LAW

YES ☐ NO ☐

STATE COMPLIANCE KIT

YES ☐ NO ☒CRO FMLA Poster  
(ENGLISH AND SPANISH)YES ☐ NO ☒RISK MANAGEMENT POSTERS

MEDICAL PROVIDER LISTING

YES ☐ NO ☒

MSDS BOOK AND HAZCOMM

YES ☒ NO ☐ACCIDENT/ INCIDENT HOTLINE  
POSTER IN OFFICEYES ☐ NO ☒

MANDATORY FOOTWARE POLICY

YES ☐ NO ☒

MANDATORY FLOOR MAT POLICY

YES ☐ NO ☒MANDATORY FLOOR CLEANING  
PROCEDURES POSTER (MONDAY)YES ☐ NO ☒MANDATORY FLOOR CLEANING  
PROCEDURES POSTER  
(TUESDAY - SUNDAY)YES ☐ NO ☒

THE RIGHT TOOLS POSTER

YES ☐ NO ☒NOTICE TO EMPLOYEES CONCERNING  
WORKERS' COMPENSATION IN TEXASYES ☒ NO ☐NOTICE TO WORKERS' COMPENSATION  
ALL OTHER STATESYES ☐ NO ☒TEXAS PAYDAY NOTICE (ENGLISH AND  
SPANISH)YES ☐ NO ☒CHOKING POSTER (ENGLISH AND  
SPANISH)YES ☐ NO ☒

ARE EMPLOYEES WEARING NON-SKID  
SOLE SHOES?

YES ☒

NO ☐

FLOOR CONDITION?

EXCELLENT GOOD BAD (circle one)

ARE QUEST DRUG FORMS AVAILABLE?

YES ☒

NO ☐

## Restaurant Visit Report

To: \_\_\_\_\_  
 From: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Subject: \_\_\_\_\_

| MANAGEMENT TEAM                                        | YES | NO |
|--------------------------------------------------------|-----|----|
| 100% Table Visits by MOD                               |     |    |
| Managers and Associates use Confident Speak            |     |    |
| Crisp, Logo Uniform, name tag                          |     |    |
| <b>STANDARDIZED TRAINING</b>                           |     |    |
| Server Training Packet used, Tests in Files            |     |    |
| Alley Rallies happening 2x a day                       |     |    |
| Manager Meetings 1 per week, with notes                |     |    |
| CT's for all departments, certificates hung            |     |    |
| Flip Charts used for all training                      |     |    |
| Best Practices followed, managers carrying focus cards |     |    |
| <b>STEPS OF SERVICE HIT</b>                            |     |    |
| Service is friendly, all employees smiling             |     |    |
| Steps of Service nailed                                |     |    |
| Fast Check and Change; lunch within 2 minutes          |     |    |
| Thank You on every guest check                         |     |    |
| Server contests in place, results posted               |     |    |
| Server scripting nailed                                |     |    |
| Leather feature tents used properly                    |     |    |
| Current PEA's posted                                   |     |    |
| All menu covers pristine, enough on hand               |     |    |
| Proper POP on all tables                               |     |    |
| <b>PROPER HOST GREET/SALUTATION</b>                    |     |    |
| Guests get a friendly greet, proper script             |     |    |
| Guests thanked and invited to return                   |     |    |
| Proper phone greet, friendly, proper script            |     |    |
| Brilliant restrooms, 10 minute checklist in use        |     |    |
| <b>SAFETY</b>                                          |     |    |
| Back door, office locked                               |     |    |
| No wet floors, floor mats used                         |     |    |

| CLEAN AND ORGANIZED                                     | YES | NO |
|---------------------------------------------------------|-----|----|
| Cleaning systems, bathroom checks                       |     |    |
| Sanitation Checklist in use                             |     |    |
| All food product is dated                               |     |    |
| All kitchen equipment clean and good repair             |     |    |
| All refrigeration has working thermometer, proper temps |     |    |
| Proper hand washing procedures in place                 |     |    |
| Hot box has working thermometer, at proper temp         |     |    |
| Lighting / music adjusted and working order             |     |    |
| FOH and BOH clean and good repair                       |     |    |
| Proper water supply (hot & cold) drains work properly   |     |    |
| Dish machine, soap, sanitizer, and temps correct        | N/A |    |
| No food particles on clean plates and utensils          |     |    |
| All food bins labeled, covered and clean                |     |    |
| No evidence of roaches, flies, insects, or rodents      |     |    |
| No cross contamination of food products                 |     |    |
| Toxic items, chemicals, labeled & stored properly       |     |    |
| All landscaping pristine, lights, signage working       |     |    |
| <b>AUDIT</b>                                            |     |    |
| Employee files complete, Application, NAD, Advisor      |     |    |
| I-9's correct                                           |     |    |
| Orientation checklist signed off by associate & GM      |     |    |
| All servers and bartenders have proper license or cert. |     |    |
| All local food handlers permits on file                 |     |    |

MOD Name \_\_\_\_\_

Inspector Name \_\_\_\_\_

**Total Score** \_\_\_\_\_

**Comments:**



Revised 03/2007

ALOHA RESTAURANT

TO: ASIT RAZA  
 FROM: CLAYTON KILIAN  
 SUBJECT: RESTAURANT AUDIT  
 DATE: 3-20-08

AUDIT DATE: 3-20-08  
 LAST AUDIT: 1-20-07

CC: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

THE AUDIT OF RESTAURANT # 621 RESULTED IN A GRADE OF "B" AS FOLLOWS:

☐ RESPONSE REQUIRED

RESTAURANT VISIT SCORE N/A

GRADING SCHEDULE

| CATEGORIES                      | CURRENT AUDIT  | LAST AUDIT |
|---------------------------------|----------------|------------|
| 1. DEPOSITS                     | <u>F</u>       | <u>A</u>   |
| 2. ALOHA SECURITY               | <u>A</u>       | <u>A</u>   |
| 3. RESTAURANT ACCOUNTING        | <u>A</u>       | <u>A</u>   |
| 4. SERVER CHECKOUTS & TIP SHARE | <u>A</u>       | <u>A</u>   |
| 5. ADMINISTRATIVE PROCEDURES    | <u>A</u>       | <u>A</u>   |
| 6. LIQUOR REPORTS               | <u>A</u>       | <u>A</u>   |
| 7. UNIT SECURITY                | <u>A</u>       | <u>A</u>   |
| 8. I-9's                        | <u>B</u>       | <u>A</u>   |
| OVERALL GRADE                   | <u>B 3.375</u> | <u>A</u>   |

## OVERALL GRADING SCALE

|     |   |      |   |   |
|-----|---|------|---|---|
| 3.5 | - | 4.0  | = | A |
| 3.0 | - | 3.49 | = | B |
| 2.0 | - | 2.99 | = | C |
| 1.0 | - | 1.99 | = | D |
| 0.0 | - | .99  | = | F |

|                                    |                     |              |
|------------------------------------|---------------------|--------------|
| Area Supervisor <u>NICK GARNEY</u> |                     |              |
| <b>CRITICAL FOUR RESULTS</b>       |                     |              |
| <u>Category</u>                    | <u>Bonus/Fine</u>   | <u>Total</u> |
| Edit Punch                         | \$0 / \$50 / -\$100 | _____        |
| Admin. Files                       | \$0 / \$50 / -\$100 | _____        |
| Liq. Permits                       | \$0 / \$50 / -\$100 | _____        |
| I-9's                              | \$0 / \$50 / -\$100 | _____        |
| Total Bonus/Fine                   |                     | \$ _____     |
| I-9 BONUS (\$250)                  |                     | YES / NO     |

**EXHIBIT**B

3817

GRADING DEPOSITS

1. DEPOSIT SLIP NOT VERIFIED WITH TWO MANAGER'S INITIALS. 5 PTS. EACH (25 PTS. MAX) ✓
2. DEPOSIT SLIPS & ARMORED CAR RECEIPTS NOT RETAINED 3 PERIODS. 5 PTS. EACH (25 PTS. MAX) ✓
3. DEPOSIT ACCURACY 25 PTS. ✓
4. LATE DEPOSITS  
1 LATE = 10 PTS  
2 LATE = 20 PTS  
3 LATE = 50 PTS

RECOMMENDATIONS

- [ ] THE DEPOSIT SHOULD BE VERIFIED BY BOTH THE CLOSING & THE OPENING MANAGERS & BOTH SHOULD INITIAL THE DEPOSIT SLIP.
- [ ] THE RETENTION PERIOD FOR DEPOSIT SLIPS & ARMORED CAR RECEIPTS IS THREE FULL PERIODS. THEY SHOULD BE KEPT SEPARATELY IN DATE ORDER.
- [ ] ALL DEPOSITS MUST BE ACCURATE. NO DEPOSIT MAY BE "ROUNDED OFF". ALL CURRENCY, COIN AND CHECKS MUST BE LISTED SEPERATELY.
- [ ] DEPOSITS ARE TO BE MADE DAILY PRIOR TO 2:00PM.

COMMENTS: \_\_\_\_\_

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TOTAL PTS.

SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

## RECOMMENDATIONS

- ALS.  
K  
D  
NOT  
IS.  
S

A

COMMENTS: \_\_\_\_\_

[illegible]

## RESTAURANT ACCOUNTING

DAILY ENVELOPES  
MUST INCLUDE:

- 5 PTS EA. ALOHA SALES REPORT
- 5 PTS EA. CREDIT CARD SLIPS AND EDC TRANSACTION REPORT
- 5 PTS EA. VOID REPORT REVIEWED AND SIGNED BY MANAGEMENT
- 5 PTS EA. AUDIT REPORT REVIEWED AND SIGNED BY MANAGER
- 5 PTS EA. GIFT CERTIFICATES NOT VOIDED AT THE TIME OF REDEMPTION
- 5 PTS EA. DOCUMENTS/RECEIPTS FOR ALL CASH PAIDOUTS

PTS.

A

## RECOMMENDATIONS

- [ ] ALL DAILY ENVELOPES MUST BE SUBMITTED TO THE CORPORATE OFFICE.
- [ ] ALL EXPENSES & INCOME SHOWN ON THE DAILY SALES REPORT MUST HAVE BACKUP IN THE DAILY ENVELOPE.
- [ ] THE EDC REPORT MUST BE RUN FOR THE CORRECT DAY'S BUSINESS & PLACED IN THE DAILY ENVELOPE.
- [ ] ALL VOID REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL AUDIT REPORTS MUST BE REVIEWED AND SIGNED BY A MANAGER.
- [ ] ALL OFF LINE GIFT CERTIFICATES AND VIP CARDS SHOULD BE VOIDED AT THE TIME OF REDEMPTION.
- [ ] SUPPORTING DOCUMENTATION MUST BE INCLUDED IN THE DSR.

**TOTAL PTS.**

SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

COMMENTS: \_\_\_\_\_

This image shows a single page from a notebook or ledger. It features ten evenly spaced, horizontal black lines running across the width of the page. The background is plain white, and there are no markings, text, or illustrations other than the ruling lines themselves.

3

SERVER CHECKOUT, TIP SHARE &  
EDITED PUNCHESRECOMMENDATIONS

- |                                                                                                                                                                               |                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. INFORMATION ON CHECKOUT REPORT IS COMPLETE AND INCLUDES: ALL CREDIT CARD RECEIPTS, ALL GIFT CERTIFICATES AND PROMOTIONAL COUPONS, AND CASH RECEIVED FROM SERVER. 35 PTS. ✓ | [ ] SERVER CHECKOUTS ARE PERFORMED EACH SHIFT AND REQUIRES MANAGEMENT TO VERIFY SUPPORTING DOCUMENTS PERTAINING TO CHECKOUT SHEET.                    |
| 2. SERVER CHECKOUT REPORT SIGNED BY MANAGEMENT & RETAINED 3 PERIODS. 30 PTS. ✓                                                                                                | [ ] CORPORATE POLICY STATES THAT SERVER CHECKOUTS BE RETAINED FOR THREE PERIODS AND SIGNED BY MANAGEMENT.                                             |
| 3. TIP SHARE CALCULATION SHEET RETAINED 3 PERIODS. 25 PTS.                                                                                                                    | [ ] TIP SHARE CALCULATION SHEET MUST BE RETAINED FOR 3 PERIODS.                                                                                       |
| 4. TIP TRAC <i>N/A</i>                                                                                                                                                        | [ ] ALL EMPLOYEES MUST SIGN TRAC REPORT WHEN RECEIVING PAYROLL CHECK. MANAGER WILL DOCUMENT AND COUNSEL THE (2) EMPLOYEES WITH THE LOWEST CASH TIP %. |
| 5. EDITED PUNCH LIST NOT RETAINED FOR 3 YEARS AND NOT SIGNED BY EMPLOYEE AND MANAGER. 50 PTS. ✓                                                                               | [ ] THE EDITED PUNCH LIST MUST BE SIGNED BY THE EMPLOYEE WHO'S TIME IS BEING ADJUSTED AND MANAGER & RETAINED 3 YEARS.                                 |
| 6. EDITED PUNCH ACCURACY REVIEW 20 PTS. PER OCCURANCE ✓                                                                                                                       | [ ] EDITED PUNCH LIST MUST REFLECT ACCURATE JOB CODE, TIME IN/OUT, RATE OF PAY, AND TIP DECLARATION.                                                  |
| 7. PAYROLL CHECKS NOT DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL. 25 PTS. ✓                                                                                    | [ ] PAYROLL CHECKS MUST BE DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL IN THE ENVELOPE PROVIDED.                                        |

*A*

COMMENTS: \_\_\_\_\_

TOTAL PTS.SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

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GRADING ADMINISTRATIVE PROCEDURESRECOMMENDATIONS

1. EMPLOYEE FILES SHOULD
- 
- INCLUDE THE FOLLOWING:

- ORIENTATION CHECKLIST  
SIGNED BY THE EMPLOYEE  
AND MANAGEMENT
- ASSOCIATE APPLICATION FOR  
EMPLOYMENT
- DRUG & ALCOHOL FREE  
WORKPLACE POLICY
- SEXUAL HARASSMENT POLICY  
AGREEMENT & ZERO TOLERANCE  
OF SEXUAL HARASSMENT
- HAZARD COMMUNICATION  
TRAINING
- TIP REPORTING  
ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS  
POLICY
- ASSOCIATE CONDITIONS OF  
EMPLOYMENT

ONE POINT FOR EACH PERCENTAGE  
POINT.  
\_\_\_\_PTS.

2. EMPLOYEE FILES NOT RETAINED
- 
- FOR 3 FULL YEARS FROM
- 
- TERMINATION.
- 
- 50 PTS.

EMPLOYEE FILES MUST INCLUDE ALL OF  
THE FOLLOWING DOCUMENTS COMPLETED:

- ORIENTATION CHECKLIST SIGNED BY  
THE EMPLOYEE AND MANAGEMENT
- ASSOCIATE APPLICATION FOR  
EMPLOYMENT
- DRUG & ALCOHOL FREE WORKPLACE  
POLICY
- SEXUAL HARASSMENT POLICY  
AGREEMENT & ZERO TOLERANCE OF  
SEXUAL HARASSMENT
- HAZARD COMMUNICATION TRAINING
- TIP REPORTING ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS POLICY
- ASSOCIATE CONDITIONS OF  
EMPLOYMENT

3. SERVER TRAINING PACKETS & SCORED [ ]
- 
- EMPLOYEE TESTS

[ ] RETENTION FOR EMPLOYEE FILES IS  
3 FULL YEARS FROM TERMINATION.

[ ] SERVER TRAINING PACKETS COMPLETED  
AND MAINTAINED IN THE EMPLOYEE FILE.  
[ ] EMPLOYEE TESTS RETAINED IN EMPLOYEE  
FILE.

25 PTS FOR EACH OCCURRENCE

4. APPLICANTS' INTERVIEW & TRACKING [ ]
- 
- FORMS.

[ ] APPLICANTS' INTERVIEW & TRACKING FORMS  
MAINTAINED IN THE EMPLOYEE FILE.  
[ ] EMPLOYEE TESTS RETAINED IN EMPLOYEE  
FILE.

25 PTS FOR EACH OCCURRENCE

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: \_\_\_\_\_

*A*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

GRADING LIQUOR REPORTS

1. LIQUOR, BEER, & WINE INVOICES NOT RETAINED FOR AT LEAST TWO YEARS (TEXAS = FOUR YEARS).  
30 PTS.
2. EMPLOYEES WITHOUT LIQUOR PERMITS.  
PASS/FAIL

A

TEXAS ONLY

1. PMIX RETAINED FOR AT LEAST FOUR YEARS.  
30 PTS.
2. POOL FUND NOT COMPLETED IN FULL & RETAINED FOUR YEARS.  
*This includes Pool Fund Financials from Corporate Office and the Manual Calculation done by store Manager.*  
(TEXAS PRIVATE CLUB ONLY).  
30 PTS.
3. 30% REPLACEMENT STAMP NOT USED ON PMIX REPORT OR BAR TAPE (TEXAS PRIVATE CLUB ONLY).  
10 PTS.
4. "FELONY FOR WEAPONS POSTER" AND "TABC HOTLINE" POSTERS IN BAR AREA OF ALL TEXAS RESTAURANTS.  
YES                      NO
5. EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE.  
50 PTS.
6. TABC LIQUOR STAMP  
20 PTS.
7. LIQUOR CHECKS NOT RETAINED FOR A PERIOD OF ONE (1) YEAR.  
25 PTS.

RECOMMENDATIONS

- [ ] LIQUOR, BEER, & WINE INVOICES ARE TO BE RETAINED A MINIMUM OF TWO YEARS (TEXAS = FOUR YEARS).
- [ ] IN THOSE RESTAURANTS WHERE IT IS A REQUIREMENT, ALL SERVERS & BARTENDERS ARE REQUIRED TO HAVE A LIQUOR PERMIT.
- [ ] PMIX REPORTS ARE TO BE RETAINED A MINIMUM OF FOUR YEARS
- [ ] THE POOL FUND LOG IS TO BE FULLY COMPLETED & RETAINED FOUR YEARS (TEXAS PRIVATE CLUB ONLY).
- [ ] THE 30% REPLACEMENT STAMP IS TO BE USED ON ALL PMIX REPORTS OR BAR JOURNALS IN TEXAS PRIVATE CLUBS.
- [ ] IN ORDER TO SATISFY TABC REQUIREMENTS, BOTH POSTERS MUST BE POSTED IN THE BAR AREA OF ALL TEXAS RESTAURANTS.
- [ ] EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE
- [ ] ALL LIQUOR BOTTLES MUST HAVE A TABC LIQUOR STAMP.
- [ ] LIQUOR CHECKS MUST BE RETAINED FOR A PERIOD OF ONE (1) YEAR.

TOTAL PTS.SCALE

100-90                      = A  
89-80                        = B  
79-70                        = C  
69-60                        = D  
BELOW 60                  = F

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6

## RECOMMENDATIONS

- [illegible]

7



EMPLOYEE I-9 FORMS & PROCEDURESRECOMMENDATIONS

- |                                                                   |                                                                                                                             |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| 1. NO GM INITIALS IN THE UPPER RIGHT HAND CORNER.<br>5 PTS. EACH. | [ ] THE GM MUST VERIFY EVERY I-9 & INITIAL IN THE UPPER RIGHT HAND CORNER.                                                  |
| 2. EMPLOYEES WITHOUT AN I-9 ON FILE.<br>30 PTS.                   | [ ] ALL EMPLOYEES HIRED AFTER 11/06/86 MUST HAVE AN I-9 ON FILE BEFORE BEGINNING WORK.                                      |
| 3. EMPLOYEES WITH INCOMPLETE FORMS.<br>15 PTS.                    | [ ] ALL I-9'S MUST BE COMPLETED IN FULL.                                                                                    |
| 4. EMPLOYEES WITH EXPIRED EMPLOYMENT AUTHORIZATION.<br>15 PTS.    | [ ] ALL INS EMPLOYMENT AUTHORIZATIONS MUST HAVE A FUTURE EXPIRATION DATE.                                                   |
| 5. CURRENT EMPLOYEE I-9'S NOT PROPERLY RETAINED.<br>20 PTS.       | [ ] CURRENT EMPLOYEE I-9'S MUST BE RETAINED IN A 3-RING BINDER IN ALPHABETICAL ORDER.                                       |
| 6. TERMINATED BINDERS NOT PROPERLY RETAINED.<br>20 PTS.           | [ ] TERMINATED I-9'S MUST BE RETAINED ALPHABETICALLY IN A 3-RING BINDER, LABELED & STORED AT THE END OF EACH CALENDAR YEAR. |
| 7. I-9 GUIDEBOOK NOT SIGNED.<br>0 PTS.                            | [ ] ALL MANAGEMENT & HOURLY EMPLOYEES WHO COMPLETE I-9'S AS A REPRESENTATIVE MUST SIGN THE I-9 GUIDEBOOK.                   |

TOTAL PTS.

85

SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

B

COMMENTS: \_\_\_\_\_

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8

LICENSES, PERMITS & POSTERSARE THE FOLLOWING POSTERS UP?

## HUMAN RESOURCES

5 IN 1 POSTER YES ☒ NO ☐SEXUAL HARASSMENT POLICY  
(FLORIDA, TEXAS, AND NEW YORK  
- SPANISH AND ENGLISH) YES ☒ NO ☐PAYDAY LAW YES ☐ NO ☐STATE COMPLIANCE KIT YES ☒ NO ☐RISK MANAGEMENT POSTERSMEDICAL PROVIDER LISTING YES ☐ NO ☐MSDS BOOK AND HAZCOMM YES ☐ NO ☐ACCIDENT/ INCIDENT HOTLINE  
POSTER IN OFFICE YES ☐ NO ☐MANDATORY FOOTWARE POLICY YES ☒ NO ☐MANDATORY FLOOR MAT POLICY YES ☒ NO ☐MANDATORY FLOOR CLEANING  
PROCEDURES POSTER (MONDAY) YES ☐ NO ☒MANDATORY FLOOR CLEANING  
PROCEDURES POSTER  
(TUESDAY - SUNDAY) YES ☐ NO ☒THE RIGHT TOOLS POSTER YES ☒ NO ☐NOTICE TO EMPLOYEES CONCERNING  
WORKERS' COMPENSATION IN TEXAS YES ☒ NO ☐NOTICE TO WORKERS' COMPENSATION  
ALL OTHER STATES YES ☐ NO ☐TEXAS PAYDAY NOTICE (ENGLISH AND  
SPANISH) YES ☐ NO ☐CHOKING POSTER (ENGLISH AND  
SPANISH) YES ☐ NO ☒

ARE EMPLOYEES WEARING NON-SKID  
SOLE SHOES?

YES   /   NO       

FLOOR CONDITION?

EXCELLENT GOOD BAD (circle one)

ARE QUEST DRUG FORMS AVAILABLE?

YES        NO   /

**Restaurant Visit Report**

To: \_\_\_\_\_  
 From: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Subject: \_\_\_\_\_

| <b>MANAGEMENT TEAM</b>                                 | <b>YES</b> | <b>NO</b> |
|--------------------------------------------------------|------------|-----------|
| 100% Table Visits by MOD                               |            |           |
| Managers and Associates use Confident Speak            |            |           |
| Crisp, Logo Uniform, name tag                          |            |           |
| <b>STANDARDIZED TRAINING</b>                           |            |           |
| Server Training Packet used, Tests in Files            |            |           |
| Alley Rallies happening 2x a day                       |            |           |
| Manager Meetings 1 per week, with notes                |            |           |
| CT's for all departments, certificates hung            |            |           |
| Flip Charts used for all training                      |            |           |
| Best Practices followed, managers carrying focus cards |            |           |
| <b>STEPS OF SERVICE HIT</b>                            |            |           |
| Service is friendly, all employees smiling             |            |           |
| Steps of Service nailed                                |            |           |
| Fast Check and Change; lunch within 2 minutes          |            |           |
| Thank You on every guest check                         |            |           |
| Server contests in place, results posted               |            |           |
| Server scripting nailed                                |            |           |
| Leather feature tents used properly                    |            |           |
| Current PEA's posted                                   |            |           |
| All menu covers pristine, enough on hand               |            |           |
| Proper POP on all tables                               |            |           |
| <b>PROPER HOST GREET/SALUTATION</b>                    |            |           |
| Guests get a friendly greet, proper script             |            |           |
| Guests thanked and invited to return                   |            |           |
| Proper phone greet, friendly, proper script            |            |           |
| Brilliant restrooms, 10 minute checklist in use        |            |           |
| <b>SAFETY</b>                                          |            |           |
| Back door, office locked                               |            |           |
| No wet floors, floor mats used                         |            |           |

| <b>CLEAN AND ORGANIZED</b>                              | <b>YES</b> | <b>NO</b> |
|---------------------------------------------------------|------------|-----------|
| <b>Cleaning systems, bathroom checks</b>                |            |           |
| Sanitation Checklist in use                             | /          |           |
| All food product is dated                               | /          |           |
| All kitchen equipment clean and good repair             | /          |           |
| All refrigeration has working thermometer, proper temps | /          |           |
| Proper hand washing procedures in place                 | /          |           |
| Hot box has working thermometer, at proper temp         | /          |           |
| Lighting / music adjusted and working order             | /          |           |
| FOH and BOH clean and good repair                       | /          |           |
| Proper water supply (hot & cold) drains work properly   | /          |           |
| Dish machine, soap, sanitizer, and temps correct        | /          |           |
| No food particles on clean plates and utensils          | /          |           |
| All food bins labeled, covered and clean                | /          |           |
| No evidence of roaches, flies, insects, or rodents      | /          |           |
| No cross contamination of food products                 | /          |           |
| Toxic items, chemicals, labeled & stored properly       | /          |           |
| All landscaping pristine, lights, signage working       | /          |           |
| <b>AUDIT</b>                                            |            |           |
| Employee files complete, Application, NAD, Advisor      | /          |           |
| I-9's correct                                           | /          |           |
| Orientation checklist signed off by associate & GM      | /          |           |
| All servers and bartenders have proper license or cert. | /          |           |
| All local food handlers permits on file                 | /          |           |

MOD Name \_\_\_\_\_

Inspector Name \_\_\_\_\_

**Total Score**

**Comments:**

Revised 03/2009

ALOHA RESTAURANT

TO: ASIF RAZA  
 FROM: Clayton Killam  
 SUBJECT: RESTAURANT AUDIT  
 DATE: 4-22-09

AUDIT DATE: 4-22-09  
 LAST AUDIT: 3-20-08

CC: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

THE AUDIT OF RESTAURANT # 621 RESULTED IN A GRADE OF "B" AS FOLLOWS:

☐ RESPONSE REQUIRED RESTAURANT VISIT SCORE \_\_\_\_\_

GRADING SCHEDULE

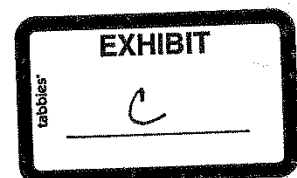
| CATEGORIES                      | CURRENT AUDIT | LAST AUDIT |
|---------------------------------|---------------|------------|
| 1. DEPOSITS                     | <u>F</u>      | <u>F</u>   |
| 2. ALOHA SECURITY               | <u>A</u>      | <u>A</u>   |
| 3. RESTAURANT ACCOUNTING        | <u>B</u>      | <u>A</u>   |
| 4. SERVER CHECKOUTS & TIP SHARE | <u>A</u>      | <u>A</u>   |
| 5. ADMINISTRATIVE PROCEDURES    | <u>A</u>      | <u>A</u>   |
| 6. LIQUOR REPORTS               | <u>A</u>      | <u>A</u>   |
| 7. UNIT SECURITY                | <u>B</u>      | <u>A</u>   |
| 8. I-9's                        | <u>A</u>      | <u>B</u>   |
| OVERALL GRADE                   | <u>B 3.25</u> | <u>B</u>   |

## OVERALL GRADING SCALE

3.5 - 4.0 = A  
 3.0 - 3.49 = B  
 2.0 - 2.99 = C  
 1.0 - 1.99 = D  
 0.0 - .99 = F

|                              |                     |              |
|------------------------------|---------------------|--------------|
| Area Supervisor _____        |                     |              |
| <b>CRITICAL FOUR RESULTS</b> |                     |              |
| <u>Category</u>              | <u>Bonus/Fine</u>   | <u>Total</u> |
| Edit Punch                   | \$0 / \$50 / -\$100 | _____        |
| Admin. Files                 | \$0 / \$50 / -\$100 | _____        |
| Liq. Permits                 | \$0 / \$50 / -\$100 | _____        |
| I-9's                        | \$0 / \$50 / -\$100 | _____        |
| Total Bonus/Fine             |                     | \$ _____     |
| I-9 BONUS (\$250) YES / NO   |                     |              |

AUDIT REVISED 03\_09.DOC



3829

GRADING DEPOSITS

1. DEPOSIT SLIP NOT VERIFIED  
WITH TWO MANAGER'S INITIALS.  
5 PTS. EACH (25 PTS. MAX)
2. DEPOSIT SLIPS & ARMORED CAR  
RECEIPTS NOT RETAINED 3  
PERIODS.  
5 PTS. EACH (25 PTS. MAX)
3. DEPOSIT ACCURACY  
25 PTS.
4. LATE DEPOSITS  
1 LATE = 10 PTS  
2 LATE = 20 PTS  
3 LATE = 50 PTS

2507  
F

RECOMMENDATIONS

- [ ] THE DEPOSIT SHOULD BE VERIFIED  
BY BOTH THE CLOSING & THE OPENING  
MANAGERS & BOTH SHOULD INITIAL THE  
DEPOSIT SLIP.
- [ ] THE RETENTION PERIOD FOR  
DEPOSIT SLIPS & ARMORED CAR RECEIPTS  
IS THREE FULL PERIODS. THEY SHOULD BE  
KEPT SEPARATELY IN DATE ORDER.
- [ ] ALL DEPOSITS MUST BE ACCURATE.  
NO DEPOSIT MAY BE "ROUNDED OFF". ALL CURRENCY,  
COIN AND CHECKS MUST BE LISTED SEPERATELY.
- [ ] DEPOSITS ARE TO BE MADE DAILY PRIOR  
TO 2:00PM.

COMMENTS: 8 LATE DEPOSITS

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

1

## RECOMMENDATIONS

- |    |                                                                           |                                     |                                                                                                       |
|----|---------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------|
| 1. | MANAGERS NOT USING SWIPE CARDS AT TERMINALS.<br>40 PTS.                   | <input checked="" type="checkbox"/> | SWIPE CARDS MUST BE USED AS A SECURITY MEASURE AGAINST THEFT.                                         |
| 2. | MUST USE MAG CARD BOX<br>BOX – NOT CHECKED.<br>10 PTS EACH. (40 PTS. MAX) | <input checked="" type="checkbox"/> | ALL EMPLOYEES WHO HAVE ACCESS TO THE ALOHA SYSTEM MUST USE MAG CARDS WHEN ACCESSING THE ALOHA SYSTEM. |
| 3. | CREDIT CARD BATCHES NOT SETTLED ON A DAILY BASIS.<br>25 PTS. EACH         | <input checked="" type="checkbox"/> | CREDIT CARD BATCHED MUST BE SETTLED AT THE END OF EACH DAY'S BUSINESS.                                |
| 4. | ALOHA EMPLOYEE ACCESS<br>20 PTS.                                          | <input checked="" type="checkbox"/> | ALOHA EMPLOYEE ACCESS LIST MUST BE CURRENT AND MATCH THE ACTIVE EMPLOYEE ROSTER.                      |

TOTAL PTS.

## SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

COMMENTS: \_\_\_\_\_

## RESTAURANT ACCOUNTING

## DAILY ENVELOPES

**MUST INCLUDE:**

- 5 PTS EA. CREDIT CARD SLIPS AND EDC TRANSACTION REPORT
- 5 PTS EA. GIFT CERTIFICATES NOT VOIDED AT THE TIME OF REDEMPTION
- 10 PTS EA. DOCUMENTS/RECEIPTS FOR ALL CASH PAIDOUTS

PTS.

L 207  
B

TOTAL PTS.

SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

## RECOMMENDATIONS

ALL DAILY ENVELOPES MUST BE  
SUBMITTED TO THE CORPORATE OFFICE.

- [ ] THE EDC REPORT MUST BE RUN FOR THE CORRECT DAY'S BUSINESS & PLACED IN THE DAILY ENVELOPE.
- [ ] ALL OFF LINE GIFT CERTIFICATES AND VIP CARDS SHOULD BE VOIDED AT THE TIME OF REDEMPTION.
- [ ] SUPPORTING DOCUMENTATION MUST BE INCLUDED IN THE DSR.

COMMENTS: \_\_\_\_\_

2 RECEIPTS missing from DSR

[illegible]

3



SERVER CHECKOUT, TIP SHARE &  
EDITED PUNCHESRECOMMENDATIONS

- |                                                                                                                                                                             |                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. INFORMATION ON CHECKOUT REPORT IS COMPLETE AND INCLUDES: ALL CREDIT CARD RECEIPTS, ALL GIFT CERTIFICATES AND PROMOTIONAL COUPONS, AND CASH RECEIVED FROM SERVER. 35 PTS. | [ ] SERVER CHECKOUTS ARE PERFORMED EACH SHIFT AND REQUIRES MANAGEMENT TO VERIFY SUPPORTING DOCUMENTS PERTAINING TO CHECKOUT SHEET.                    |
| 2. SERVER CHECKOUT REPORT SIGNED BY MANAGEMENT & RETAINED 3 PERIODS. 30 PTS.                                                                                                | [ ] CORPORATE POLICY STATES THAT SERVER CHECKOUTS BE RETAINED FOR THREE PERIODS AND SIGNED BY MANAGEMENT.                                             |
| 3. TIP SHARE CALCULATION SHEET RETAINED 3 PERIODS. 25 PTS.                                                                                                                  | [ ] TIP SHARE CALCULATION SHEET MUST BE RETAINED FOR 3 PERIODS.                                                                                       |
| 4. TIP TRAC                                                                                                                                                                 | [ ] ALL EMPLOYEES MUST SIGN TRAC REPORT WHEN RECEIVING PAYROLL CHECK. MANAGER WILL DOCUMENT AND COUNSEL THE (2) EMPLOYEES WITH THE LOWEST CASH TIP %. |
| 5. EDITED PUNCH LIST NOT RETAINED FOR 3 YEARS AND NOT SIGNED BY EMPLOYEE AND MANAGER. 50 PTS.                                                                               | [ ] THE EDITED PUNCH LIST MUST BE SIGNED BY THE EMPLOYEE WHO'S TIME IS BEING ADJUSTED AND MANAGER & RETAINED 3 YEARS.                                 |
| 6. EDITED PUNCH ACCURACY REVIEW 20 PTS. PER OCCURANCE                                                                                                                       | [ ] EDITED PUNCH LIST MUST REFLECT ACCURATE JOB CODE, TIME IN/OUT, RATE OF PAY, AND TIP DECLARATION.                                                  |
| 7. PAYROLL CHECKS NOT DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL. 25 PTS.                                                                                    | [ ] PAYROLL CHECKS MUST BE DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL IN THE ENVELOPE PROVIDED.                                        |

A

COMMENTS: \_\_\_\_\_

TOTAL PTS.SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

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4

GRADING ADMINISTRATIVE PROCEDURESRECOMMENDATIONS

1. EMPLOYEE FILES SHOULD INCLUDE THE FOLLOWING:
- ORIENTATION CHECKLIST SIGNED BY THE EMPLOYEE AND MANAGEMENT
  - ASSOCIATE APPLICATION FOR EMPLOYMENT
  - DRUG & ALCOHOL FREE WORKPLACE POLICY
  - SEXUAL HARASSMENT POLICY AGREEMENT & ZERO TOLERANCE OF SEXUAL HARASSMENT
  - HAZARD COMMUNICATION TRAINING
  - TIP REPORTING ACKNOWLEDGEMENT
  - BLOODBORNE PATHOGENS POLICY
  - ASSOCIATE CONDITIONS OF EMPLOYMENT
- EMPLOYEE FILES MUST INCLUDE ALL OF THE FOLLOWING DOCUMENTS COMPLETED:
- ORENTATION CHECKLIST SIGNED BY THE EMPLOYEE AND MANAGEMENT
  - ASSOCIATE APPLICATION FOR EMPLOYMENT
  - DRUG & ALCOHOL FREE WORKPLACE POLICY
  - SEXUAL HARASSMENT POLICY AGREEMENT & ZERO TOLERANCE OF SEXUAL HARASSMENT
  - HAZARD COMMUNICATION TRAINING
  - TIP REPORTING ACKNOWLEDGEMENT
  - BLOODBORNE PATHOGENS POLICY
  - ASSOCIATE CONDITIONS OF EMPLOYMENT
- ONE POINT FOR EACH PERCENTAGE POINT.  
\_\_\_\_PTS.
2. EMPLOYEE FILES NOT RETAINED FOR 3 FULL YEARS FROM TERMINATION. 50 PTS. ☐ RETENTION FOR EMPLOYEE FILES IS 3 FULL YEARS FROM TERMINATION.
3. SERVER TRAINING PACKETS & SCORED EMPLOYEE TESTS ☐ SERVER TRAINING PACKETS COMPLETED AND MAINTAINED IN THE EMPLOYEE FILE. ☐ EMPLOYEE TESTS RETAINED IN EMPLOYEE FILE.  
25 PTS FOR EACH OCCURRENCE ✓
4. APPLICANTS' INTERVIEW & TRACKING FORMS. ☐ APPLICANTS' INTERVIEW & TRACKING FORMS MAINTAINED IN THE EMPLOYEE FILE. ☐ EMPLOYEE TESTS RETAINED IN EMPLOYEE FILE.  
25 PTS FOR EACH OCCURRENCE ✓

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AUDIT REVISED 03\_09.DOC

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GRADING LIQUOR REPORTS

1. LIQUOR, BEER, & WINE INVOICES NOT RETAINED FOR AT LEAST TWO YEARS (TEXAS = FOUR YEARS).  
30 PTS.
2. EMPLOYEES WITHOUT LIQUOR PERMITS.  
PASS/FAIL

RECOMMENDATIONS

- [ ] LIQUOR, BEER, & WINE INVOICES ARE TO BE RETAINED A MINIMUM OF TWO YEARS (TEXAS = FOUR YEARS).
- [ ] IN THOSE RESTAURANTS WHERE IT IS A REQUIREMENT, ALL SERVERS & BARTENDERS ARE REQUIRED TO HAVE A LIQUOR PERMIT.

TEXAS ONLY

1. PMIX RETAINED FOR AT LEAST FOUR YEARS.  
30 PTS.
2. POOL FUND NOT COMPLETED IN FULL & RETAINED FOUR YEARS.  
*This includes Pool Fund Financials from Corporate Office and the Manual Calculation done by store Manager.*  
(TEXAS PRIVATE CLUB ONLY).  
30 PTS.
3. 30% REPLACEMENT STAMP NOT USED ON PMIX REPORT OR BAR TAPE (TEXAS PRIVATE CLUB ONLY).  
10 PTS.
4. "FELONY FOR WEAPONS POSTER" AND "TABC HOTLINE" POSTERS IN BAR AREA OF ALL TEXAS RESTAURANTS.  
YES NO
5. EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE.  
50 PTS.
6. TABC LIQUOR STAMP  
20 PTS.
7. LIQUOR CHECKS NOT RETAINED FOR A PERIOD OF ONE (1) YEAR.  
25 PTS.

- [ ] PMIX REPORTS ARE TO BE RETAINED A MINIMUM OF FOUR YEARS
- [ ] THE POOL FUND LOG IS TO BE FULLY COMPLETED & RETAINED FOUR YEARS (TEXAS PRIVATE CLUB ONLY).
- [ ] THE 30% REPLACEMENT STAMP IS TO BE USED ON ALL PMIX REPORTS OR BAR JOURNALS IN TEXAS PRIVATE CLUBS.
- [ ] IN ORDER TO SATISFY TABC REQUIREMENTS, BOTH POSTERS MUST BE POSTED IN THE BAR AREA OF ALL TEXAS RESTAURANTS.
- [ ] EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE
- [ ] ALL LIQUOR BOTTLES MUST HAVE A TABC LIQUOR STAMP.
- [ ] LIQUOR CHECKS MUST BE RETAINED FOR A PERIOD OF ONE (1) YEAR.

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6

GRADING UNIT SECURITYRECOMMENDATIONS

- |                                                                                                                                      |                                                                                               |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| 1. FRONT, REAR, AND SIDE ENTRIES UNLOCKED DURING NON-OPERATING HOURS, OR THE KITCHEN DOOR LEFT OPEN WITH NO MANAGER PRESENT. 50 PTS. | [ ] ALL ENTRY DOORS MUST REMAIN LOCKED DURING NON-OPERATING HOURS.                            |
| 2. OFFICE DOOR LEFT OPEN OR UNLOCKED. 25 PTS.                                                                                        | [ ] THE KITCHEN DOOR MUST NEVER REMAIN OPEN UNLESS A MANAGER IS PRESENT.                      |
| 3. DETEX ALARM OR PANIC BAR NOT ARMED. 25 PTS.                                                                                       | [ ] THE OFFICE DOOR SHOULD REMAIN CLOSED & LOCKED AT ALL TIMES.                               |
| 4. SAFE UNLOCKED (DAY LOCK). 50 PTS.                                                                                                 | [ ] THE DETEX ALARM OR PANIC BAR SHOULD BE ARMED UNLESS A MANAGER IS PRESENT.                 |
| 5. CASH IN ANY REGISTER DRAWER IN EXCESS OF \$500 OVER BEGINNING BANK. CASH IN ANY OFFICE DRAWER IN EXCESS OF \$500. 50 PTS.         | [ ] THE SAFE MUST REMAIN LOCKED AT ALL TIMES UNLESS A MANAGER IS CONDUCTING BUSINESS FROM IT. |
| [ ] CASH IN THE REGISTER DRAWER SHOULD BE KEPT TO A MINIMUM. CASH IN OFFICE DRAWER SHOULD BE KEPT TO A MINIMUM.                      |                                                                                               |

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: Back Door De. Thrunot working

EMPLOYEE I-9 FORMS & PROCEDURESRECOMMENDATIONS

- |                                                                   |                                                                                                                             |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| 1. NO GM INITIALS IN THE UPPER RIGHT HAND CORNER.<br>5 PTS. EACH. | [ ] THE GM MUST VERIFY EVERY I-9 & INITIAL IN THE UPPER RIGHT HAND CORNER.                                                  |
| 2. EMPLOYEES WITHOUT AN I-9 ON FILE.<br>35 PTS.                   | [ ] ALL EMPLOYEES HIRED AFTER 11/06/86 MUST HAVE AN I-9 ON FILE BEFORE BEGINNING WORK.                                      |
| 3. EMPLOYEES WITH INCOMPLETE FORMS.<br>35 PTS.                    | [ ] ALL I-9'S MUST BE COMPLETED IN FULL.                                                                                    |
| 4. EMPLOYEES WITH EXPIRED EMPLOYMENT AUTHORIZATION.<br>35 PTS.    | [ ] ALL INS EMPLOYMENT AUTHORIZATIONS MUST HAVE A FUTURE EXPIRATION DATE.                                                   |
| 5. CURRENT EMPLOYEE I-9'S NOT PROPERLY RETAINED.<br>20 PTS.       | [ ] CURRENT EMPLOYEE I-9'S MUST BE RETAINED IN A 3-RING BINDER IN ALPHABETICAL ORDER.                                       |
| 6. TERMINATED BINDERS NOT PROPERLY RETAINED.<br>20 PTS.           | [ ] TERMINATED I-9'S MUST BE RETAINED ALPHABETICALLY IN A 3-RING BINDER, LABELED & STORED AT THE END OF EACH CALENDAR YEAR. |
| 7. I-9 GUIDEBOOK NOT SIGNED.<br>0 PTS.                            | [ ] ALL MANAGEMENT & HOURLY EMPLOYEES WHO COMPLETE I-9'S AS A REPRESENTATIVE MUST SIGN THE I-9 GUIDEBOOK.                   |

TOTAL PTS.COMMENTS: 100%SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

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LICENSES, PERMITS & POSTERSARE THE FOLLOWING POSTERS UP?

## HUMAN RESOURCES

|                                                                                     |                                         |                             |
|-------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------|
| 5 IN 1 POSTER                                                                       | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| SEXUAL HARASSMENT POLICY<br>(FLORIDA, TEXAS, AND NEW YORK<br>- SPANISH AND ENGLISH) | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| PAYDAY LAW                                                                          | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| STATE COMPLIANCE KIT                                                                | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |

RISK MANAGEMENT POSTERS

|                                                                     |                                         |                                        |
|---------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| MEDICAL PROVIDER LISTING                                            | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| MSDS BOOK AND HAZCOMM                                               | YES <input type="checkbox"/>            | NO <input type="checkbox"/>            |
| ACCIDENT/ INCIDENT HOTLINE<br>POSTER IN OFFICE                      | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| MANDATORY FOOTWEAR POLICY                                           | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| MANDATORY FLOOR MAT POLICY                                          | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| MANDATORY FLOOR CLEANING<br>PROCEDURES POSTER (MONDAY)              | YES <input type="checkbox"/>            | NO <input type="checkbox"/>            |
| MANDATORY FLOOR CLEANING<br>PROCEDURES POSTER<br>(TUESDAY - SUNDAY) | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |
| THE RIGHT TOOLS POSTER                                              | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| NOTICE TO EMPLOYEES CONCERNING<br>WORKERS' COMPENSATION IN TEXAS    | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| NOTICE TO WORKERS' COMPENSATION<br>ALL OTHER STATES                 | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| TEXAS PAYDAY NOTICE (ENGLISH AND<br>SPANISH)                        | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>            |
| CHOKING POSTER (ENGLISH AND<br>SPANISH)                             | YES <input type="checkbox"/>            | NO <input checked="" type="checkbox"/> |

9

ARE EMPLOYEES WEARING NON-SKID  
SOLE SHOES?

YES\_\_\_\_ NO\_\_\_\_

FLOOR CONDITION?

EXCELLENT GOOD BAD (circle one)

ARE QUEST DRUG FORMS AVAILABLE?

YES\_\_\_\_ NO\_\_\_\_



### Restaurant Visit Report

To: \_\_\_\_\_  
 From: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Subject: \_\_\_\_\_

| <b>MANAGEMENT TEAM</b>                                 | <b>YES</b> | <b>NO</b> |
|--------------------------------------------------------|------------|-----------|
| 100% Table Visits by MOD                               |            |           |
| Managers and Associates use Confident Speak            |            |           |
| Crisp, Logo Uniform, name tag                          |            |           |
| <b>STANDARDIZED TRAINING</b>                           |            |           |
| Server Training Packet used, Tests in Files            |            |           |
| Alley Rallies happening 2x a day                       |            |           |
| Manager Meetings 1 per week, with notes                |            |           |
| CT's for all departments, certificates hung            |            |           |
| Flip Charts used for all training                      |            |           |
| Best Practices followed, managers carrying focus cards |            |           |
| <b>STEPS OF SERVICE HIT</b>                            |            |           |
| Service is friendly, all employees smiling             |            |           |
| Steps of Service nailed                                |            |           |
| Fast Check and Change; lunch within 2 minutes          |            |           |
| Thank You on every guest check                         |            |           |
| Server contests in place, results posted               |            |           |
| Server scripting nailed                                |            |           |
| Leather feature tents used properly                    |            |           |
| Current PEA's posted                                   |            |           |
| All menu covers pristine, enough on hand               |            |           |
| Proper POP on all tables                               |            |           |
| <b>PROPER HOST GREET/SALUTATION</b>                    |            |           |
| Guests get a friendly greet, proper script             |            |           |
| Guests thanked and invited to return                   |            |           |
| Proper phone greet, friendly, proper script            |            |           |
| Brilliant restrooms, 10 minute checklist in use        |            |           |
| <b>SAFETY</b>                                          |            |           |
| Back door, office locked                               |            |           |
| No wet floors, floor mats used                         |            |           |

| <b>CLEAN AND ORGANIZED</b>                              | <b>YES</b> | <b>NO</b> |
|---------------------------------------------------------|------------|-----------|
| <b>Cleaning systems, bathroom checks</b>                |            |           |
| Sanitation Checklist in use                             |            |           |
| All food product is dated                               |            |           |
| All kitchen equipment clean and good repair             |            |           |
| All refrigeration has working thermometer, proper temps |            |           |
| Proper hand washing procedures in place                 |            |           |
| Hot box has working thermometer, at proper temp         |            |           |
| Lighting / music adjusted and working order             |            |           |
| FOH and BOH clean and good repair                       |            |           |
| Proper water supply (hot & cold) drains work properly   |            |           |
| Dish machine, soap, sanitizer, and temps correct        |            |           |
| No food particles on clean plates and utensils          |            |           |
| All food bins labeled, covered and clean                |            |           |
| No evidence of roaches, flies, insects, or rodents      |            |           |
| No cross contamination of food products                 |            |           |
| Toxic items, chemicals, labeled & stored properly       |            |           |
| All landscaping pristine, lights, signage working       |            |           |
| <b>AUDIT</b>                                            |            |           |
| Employee files complete, Application, NAD, Advisor      |            |           |
| I-9's correct                                           |            |           |
| Orientation checklist signed off by associate & GM      |            |           |
| All servers and bartenders have proper license or cert. |            |           |
| All local food handlers permits on file                 |            |           |

MOD Name \_\_\_\_\_

Inspector Name \_\_\_\_\_

Total Score

Comments:

ALOHA RESTAURANT

TO: COLIN KELLY  
 FROM: CLAYTON KELLY  
 SUBJECT: RESTAURANT AUDIT  
 DATE: 4-19-10

AUDIT DATE: 4-19-10  
 LAST AUDIT: 4-22-09

cc: \_\_\_\_\_

THE AUDIT OF RESTAURANT # 621 RESULTED IN A GRADE OF "C" AS FOLLOWS:

☐ RESPONSE REQUIRED

 RESTAURANT VISIT SCORE N/A
GRADING SCHEDULE

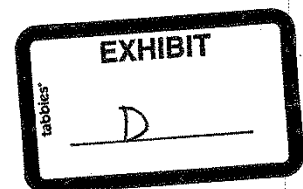
| CATEGORIES                      | CURRENT AUDIT | LAST AUDIT |
|---------------------------------|---------------|------------|
| 1. DEPOSITS                     | <u>A</u>      | <u>F</u>   |
| 2. ALOHA SECURITY               | <u>A</u>      | <u>A</u>   |
| 3. RESTAURANT ACCOUNTING        | <u>A</u>      | <u>B</u>   |
| 4. SERVER CHECKOUTS & TIP SHARE | <u>A</u>      | <u>A</u>   |
| 5. ADMINISTRATIVE PROCEDURES    | <u>F</u>      | <u>A</u>   |
| 6. LIQUOR REPORTS               | <u>F</u>      | <u>A</u>   |
| 7. UNIT SECURITY                | <u>C</u>      | <u>B</u>   |
| 8. I-9's                        | <u>F</u>      | <u>A</u>   |
| OVERALL GRADE                   | <u>C 2.25</u> | <u>B</u>   |

## OVERALL GRADING SCALE

|     |   |      |   |   |
|-----|---|------|---|---|
| 3.5 | - | 4.0  | = | A |
| 3.0 | - | 3.49 | = | B |
| 2.0 | - | 2.99 | = | C |
| 1.0 | - | 1.99 | = | D |
| 0.0 | - | .99  | = | F |

|                                     |          |
|-------------------------------------|----------|
| Area Supervisor <u>NICK GARDNER</u> |          |
| CRITICAL FOUR RESULTS               |          |
| Category                            | Grade    |
| Edit Punch                          | <u>A</u> |
| Admin. Files                        | <u>F</u> |
| Liq. Permits                        | <u>F</u> |
| I-9's                               | <u>F</u> |

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GRADING DEPOSITS

1. DEPOSIT SLIP NOT VERIFIED  
WITH TWO MANAGER'S INITIALS.  
5 PTS. EACH (25 PTS. MAX) ✓
2. DEPOSIT SLIPS & ARMORED CAR  
RECEIPTS NOT RETAINED 3  
PERIODS. ✓  
5 PTS. EACH (25 PTS. MAX)
3. DEPOSIT ACCURACY ✓  
25 PTS.
4. LATE DEPOSITS  
1 LATE = 10 PTS  
2 LATE = 20 PTS  
3 LATE = 50 PTS ✓

RECOMMENDATIONS

- [ ] THE DEPOSIT SHOULD BE VERIFIED  
BY BOTH THE CLOSING & THE OPENING  
MANAGERS & BOTH SHOULD INITIAL THE  
DEPOSIT SLIP.
- [ ] THE RETENTION PERIOD FOR  
DEPOSIT SLIPS & ARMORED CAR RECEIPTS  
IS THREE FULL PERIODS. THEY SHOULD BE  
KEPT SEPARATELY IN DATE ORDER.
- [ ] ALL DEPOSITS MUST BE ACCURATE.  
NO DEPOSIT MAY BE "ROUNDED OFF". ALL CURRENCY,  
COIN AND CHECKS MUST BE LISTED SEPERATELY.
- [ ] DEPOSITS ARE TO BE MADE DAILY PRIOR  
TO 2:00PM.

COMMENTS: \_\_\_\_\_

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\_\_\_\_\_

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1

TOTAL PTS.

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F



RESTAURANT ACCOUNTING

DAILY ENVELOPES  
MUST INCLUDE:

- 5 PTS EA. CREDIT CARD SLIPS AND EDC TRANSACTION REPORT
  - 5 PTS EA. GIFT CERTIFICATES NOT VOIDED AT THE TIME OF REDEMPTION
  - 10 PTS EA. DOCUMENTS/RECEIPTS FOR ALL CASH PAIDOUTS
- \_\_\_\_\_ PTS.

RECOMMENDATIONS

ALL DAILY ENVELOPES MUST BE SUBMITTED TO THE CORPORATE OFFICE.

- [ ] THE EDC REPORT MUST BE RUN FOR THE CORRECT DAY'S BUSINESS & PLACED IN THE DAILY ENVELOPE.
- [ ] ALL OFF LINE GIFT CERTIFICATES AND VIP CARDS SHOULD BE VOIDED AT THE TIME OF REDEMPTION.
- [ ] SUPPORTING DOCUMENTATION MUST BE INCLUDED IN THE DSR.

COMMENTS: \_\_\_\_\_

TOTAL PTS.

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

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SERVER CHECKOUT, TIP SHARE & EDITED PUNCHESRECOMMENDATIONS

- |                                                                                                                                                                             |                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. INFORMATION ON CHECKOUT REPORT IS COMPLETE AND INCLUDES: ALL CREDIT CARD RECEIPTS, ALL GIFT CERTIFICATES AND PROMOTIONAL COUPONS, AND CASH RECEIVED FROM SERVER. 35 PTS. | [ ] SERVER CHECKOUTS ARE PERFORMED EACH SHIFT AND REQUIRES MANAGEMENT TO VERIFY SUPPORTING DOCUMENTS PERTAINING TO CHECKOUT SHEET.                    |
| 2. SERVER CHECKOUT REPORT SIGNED BY MANAGEMENT & RETAINED 3 PERIODS. 30 PTS.                                                                                                | [ ] CORPORATE POLICY STATES THAT SERVER CHECKOUTS BE RETAINED FOR THREE PERIODS AND SIGNED BY MANAGEMENT.                                             |
| 3. TIP SHARE CALCULATION SHEET RETAINED 3 PERIODS. 25 PTS.                                                                                                                  | [ ] TIP SHARE CALCULATION SHEET MUST BE RETAINED FOR 3 PERIODS.                                                                                       |
| 4. TIP TRAC                                                                                                                                                                 | [ ] ALL EMPLOYEES MUST SIGN TRAC REPORT WHEN RECEIVING PAYROLL CHECK. MANAGER WILL DOCUMENT AND COUNSEL THE (2) EMPLOYEES WITH THE LOWEST CASH TIP %. |
| 5. EDITED PUNCH LIST NOT RETAINED FOR 3 YEARS AND NOT SIGNED BY EMPLOYEE AND MANAGER. 50 PTS.                                                                               | [ ] THE EDITED PUNCH LIST MUST BE SIGNED BY THE EMPLOYEE WHO'S TIME IS BEING ADJUSTED AND MANAGER & RETAINED 3 YEARS.                                 |
| 6. EDITED PUNCH ACCURACY REVIEW 20 PTS. PER OCCURANCE                                                                                                                       | [ ] EDITED PUNCH LIST MUST REFLECT ACCURATE JOB CODE, TIME IN/OUT, RATE OF PAY, AND TIP DECLARATION.                                                  |
| 7. PAYROLL CHECKS NOT DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL. 25 PTS.                                                                                    | [ ] PAYROLL CHECKS MUST BE DISTRIBUTED WITHIN TWO PAY PERIODS OR RETURNED TO PAYROLL IN THE ENVELOPE PROVIDED.                                        |

TOTAL PTS.SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

COMMENTS: \_\_\_\_\_

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4

GRADING ADMINISTRATIVE PROCEDURESRECOMMENDATIONS

1. EMPLOYEE FILES SHOULD INCLUDE THE FOLLOWING:

- ORIENTATION CHECKLIST SIGNED BY THE EMPLOYEE AND MANAGEMENT
- ASSOCIATE APPLICATION FOR EMPLOYMENT
- DRUG & ALCOHOL FREE WORKPLACE POLICY
- SEXUAL HARASSMENT POLICY AGREEMENT & ZERO TOLERANCE OF SEXUAL HARASSMENT
- HAZARD COMMUNICATION TRAINING
- TIP REPORTING ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS POLICY
- ASSOCIATE CONDITIONS OF EMPLOYMENT

EMPLOYEE FILES MUST INCLUDE ALL OF THE FOLLOWING DOCUMENTS COMPLETED:

- ORIENTATION CHECKLIST SIGNED BY THE EMPLOYEE AND MANAGEMENT
- ASSOCIATE APPLICATION FOR EMPLOYMENT
- DRUG & ALCOHOL FREE WORKPLACE POLICY
- SEXUAL HARASSMENT POLICY AGREEMENT & ZERO TOLERANCE OF SEXUAL HARASSMENT
- HAZARD COMMUNICATION TRAINING
- TIP REPORTING ACKNOWLEDGEMENT
- BLOODBORNE PATHOGENS POLICY
- ASSOCIATE CONDITIONS OF EMPLOYMENT

ONE POINT FOR EACH PERCENTAGE POINT.  
30 PTS.

2. EMPLOYEE FILES NOT RETAINED FOR 3 FULL YEARS FROM TERMINATION. ✓  
50 PTS.

[ ] RETENTION FOR EMPLOYEE FILES IS 3 FULL YEARS FROM TERMINATION.

3. SERVER TRAINING PACKETS & SCORED [ ] EMPLOYEE TESTS

[ ] SERVER TRAINING PACKETS COMPLETED AND MAINTAINED IN THE EMPLOYEE FILE.  
[ ] EMPLOYEE TESTS RETAINED IN EMPLOYEE FILE.

25 PTS FOR EACH OCCURRENCE

4. APPLICANTS' INTERVIEW & TRACKING FORMS. {25} {30} ✓

[ ] APPLICANTS' INTERVIEW & TRACKING FORMS MAINTAINED IN THE EMPLOYEE FILE.  
[ ] EMPLOYEE TESTS RETAINED IN EMPLOYEE FILE.

25 PTS FOR EACH OCCURRENCE

TOTAL PTS.

{35} ✓

COMMENTS: Six Emps with no

SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

ARBITRATION AGREEMENT

ONE NO TRACKING FORM

ONE NO FORMS AND SIGNATURE

5

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GRADING LIQUOR REPORTS

1. LIQUOR, BEER, & WINE INVOICES NOT RETAINED FOR AT LEAST TWO YEARS (TEXAS = FOUR YEARS).  
30 PTS.

2. EMPLOYEES WITHOUT LIQUOR PERMITS.  
PASS/FAIL

RECOMMENDATIONS

- [ ] LIQUOR, BEER, & WINE INVOICES ARE TO BE RETAINED A MINIMUM OF TWO YEARS (TEXAS = FOUR YEARS).

- [X] IN THOSE RESTAURANTS WHERE IT IS A REQUIREMENT, ALL SERVERS & BARTENDERS ARE REQUIRED TO HAVE A LIQUOR PERMIT.

TEXAS ONLY

1. PMIX RETAINED FOR AT LEAST FOUR YEARS.  
30 PTS.

- [ ] PMIX REPORTS ARE TO BE RETAINED A MINIMUM OF FOUR YEARS

2. POOL FUND NOT COMPLETED IN FULL & RETAINED FOUR YEARS.  
*This includes Pool Fund Financials from Corporate Office and the Manual Calculation done by store Manager.*  
(TEXAS PRIVATE CLUB ONLY).  
30 PTS.

- [ ] THE POOL FUND LOG IS TO BE FULLY COMPLETED & RETAINED FOUR YEARS (TEXAS PRIVATE CLUB ONLY).

3. 30% REPLACEMENT STAMP NOT USED ON PMIX REPORT OR BAR TAPE (TEXAS PRIVATE CLUB ONLY).  
10 PTS.

- [ ] THE 30% REPLACEMENT STAMP IS TO BE USED ON ALL PMIX REPORTS OR BAR JOURNALS IN TEXAS PRIVATE CLUBS.

4. "FELONY FOR WEAPONS POSTER" AND "TABC HOTLINE" POSTERS IN BAR AREA OF ALL TEXAS RESTAURANTS.  
YES NO

- [ ] IN ORDER TO SATISFY TABC REQUIREMENTS, BOTH POSTERS MUST BE POSTED IN THE BAR AREA OF ALL TEXAS RESTAURANTS.

5. EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE.  
50 PTS.

- [ ] EMPLOYEES MUST HAVE TABC CERTIFICATION WITHIN 30 DAYS OF HIRE

6. TABC LIQUOR STAMP  
20 PTS.

- [ ] ALL LIQUOR BOTTLES MUST HAVE A TABC LIQUOR STAMP.

7. LIQUOR CHECKS NOT RETAINED FOR A PERIOD OF ONE (1) YEAR.  
25 PTS.

- [ ] LIQUOR CHECKS MUST BE RETAINED FOR A PERIOD OF ONE (1) YEAR.

TOTAL PTS.SCALE

100-90 = A  
89-80 = B  
79-70 = C  
69-60 = D  
BELOW 60 = F

COMMENTS: GM Colin Kelley

No TABC Permit.

6





EMPLOYEE I-9 FORMS & PROCEDURESRECOMMENDATIONS

- |                                                                   |                                                                                                                                                  |
|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. NO GM INITIALS IN THE UPPER RIGHT HAND CORNER.<br>5 PTS. EACH. | <input type="checkbox"/> THE GM MUST VERIFY EVERY I-9 & INITIAL IN THE UPPER RIGHT HAND CORNER.                                                  |
| 2. EMPLOYEES WITHOUT AN I-9 ON FILE.<br>50 PTS.                   | <input type="checkbox"/> ALL EMPLOYEES HIRED AFTER 11/06/86 MUST HAVE AN I-9 ON FILE BEFORE BEGINNING WORK.                                      |
| 3. EMPLOYEES WITH INCOMPLETE FORMS.<br>35 PTS.                    | <input checked="" type="checkbox"/> ALL I-9'S MUST BE COMPLETED IN FULL.                                                                         |
| 4. EMPLOYEES WITH EXPIRED EMPLOYMENT AUTHORIZATION.<br>35 PTS.    | <input checked="" type="checkbox"/> ALL INS EMPLOYMENT AUTHORIZATIONS MUST HAVE A FUTURE EXPIRATION DATE.                                        |
| 5. CURRENT EMPLOYEE I-9'S NOT PROPERLY RETAINED.<br>20 PTS.       | <input type="checkbox"/> CURRENT EMPLOYEE I-9'S MUST BE RETAINED IN A 3-RING BINDER IN ALPHABETICAL ORDER.                                       |
| 6. TERMINATED BINDERS NOT PROPERLY RETAINED.<br>20 PTS.           | <input type="checkbox"/> TERMINATED I-9'S MUST BE RETAINED ALPHABETICALLY IN A 3-RING BINDER, LABELED & STORED AT THE END OF EACH CALENDAR YEAR. |
| 7. I-9 GUIDEBOOK NOT SIGNED.<br>0 PTS.                            | <input type="checkbox"/> ALL MANAGEMENT & HOURLY EMPLOYEES WHO COMPLETE I-9'S AS A REPRESENTATIVE MUST SIGN THE I-9 GUIDEBOOK.                   |

TOTAL PTS.

SCALE

|          |     |
|----------|-----|
| 100-90   | = A |
| 89-80    | = B |
| 79-70    | = C |
| 69-60    | = D |
| BELOW 60 | = F |

COMMENTS: Two EmployeesSANDOVAL FELIX ANDHERNANDEZ ARELIS HAVEEXPIRED RESIDENT ALIEN CARDSTwo Term Employees withNO DOCUMENT LISTED ONI-9s

8

**LICENSES, PERMITS & POSTERS****ARE THE FOLLOWING POSTERS UP?****HUMAN RESOURCES**

5 IN 1 POSTER

YES ☒ NO ☐SEXUAL HARASSMENT POLICY  
(FLORIDA, TEXAS, AND NEW YORK  
- SPANISH AND ENGLISH)YES ☒ NO ☐

PAYDAY LAW

YES ☒ NO ☐

STATE COMPLIANCE KIT

YES ☒ NO ☐**RISK MANAGEMENT POSTERS**

MEDICAL PROVIDER LISTING

YES ☐ NO ☐

MSDS BOOK AND HAZCOMM

YES ☐ NO ☐ACCIDENT/ INCIDENT HOTLINE  
POSTER IN OFFICEYES ☐ NO ☐

MANDATORY FOOTWARE POLICY

YES ☒ NO ☐

MANDATORY FLOOR MAT POLICY

YES ☒ NO ☐MANDATORY FLOOR CLEANING  
PROCEDURES POSTER (MONDAY)YES ☐ NO ☐MANDATORY FLOOR CLEANING  
PROCEDURES POSTER  
(TUESDAY - SUNDAY)YES ☐ NO ☐

THE RIGHT TOOLS POSTER

YES ☒ NO ☐NOTICE TO EMPLOYEES CONCERNING  
WORKERS' COMPENSATION IN TEXASYES ☒ NO ☐NOTICE TO WORKERS' COMPENSATION  
ALL OTHER STATESYES ☒ NO ☐TEXAS PAYDAY NOTICE (ENGLISH AND  
SPANISH)YES ☐ NO ☐CHOKING POSTER (ENGLISH AND  
SPANISH)YES ☒ NO ☐

9

AUDIT REVISED 02\_10.DOC

3851

Supp. App. 73

ARE EMPLOYEES WEARING NON-SKID  
SOLE SHOES?

YES        NO       

FLOOR CONDITION?

EXCELLENT GOOD BAD (circle one)

ARE QUEST DRUG FORMS AVAILABLE?

YES        NO

## Restaurant Visit Report

To: \_\_\_\_\_  
 From: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Subject: \_\_\_\_\_

| MANAGEMENT TEAM                                        | YES | NO |
|--------------------------------------------------------|-----|----|
| 100% Table Visits by MOD                               |     |    |
| Managers and Associates use Confident Speak            |     |    |
| Crisp, Logo Uniform, name tag                          |     |    |
| STANDARDIZED TRAINING                                  | YES | NO |
| Server Training Packet used, Tests in Files            |     |    |
| Alley Rallies happening 2x a day                       |     |    |
| Manager Meetings 1 per week, with notes                |     |    |
| CT's for all departments, certificates hung            |     |    |
| Flip Charts used for all training                      |     |    |
| Best Practices followed, managers carrying focus cards |     |    |
| STEPS OF SERVICE HIT                                   | YES | NO |
| Service is friendly, all employees smiling             |     |    |
| Steps of Service nailed                                |     |    |
| Fast Check and Change; lunch within 2 minutes          |     |    |
| Thank You on every guest check                         |     |    |
| Server contests in place, results posted               |     |    |
| Server scripting nailed                                |     |    |
| Leather feature tents used properly                    |     |    |
| Current PEA's posted                                   |     |    |
| All menu covers pristine, enough on hand               |     |    |
| Proper POP on all tables                               |     |    |
| PROPER HOST GREET/SALUTATION                           | YES | NO |
| Guests get a friendly greet, proper script             |     |    |
| Guests thanked and invited to return                   |     |    |
| Proper phone greet, friendly, proper script            |     |    |
| Brilliant restrooms, 10 minute checklist in use        |     |    |
| SAFETY                                                 | YES | NO |
| Back door, office locked                               |     |    |
| No wet floors, floor mats used                         |     |    |

| CLEAN AND ORGANIZED                                     | YES | NO                                  |
|---------------------------------------------------------|-----|-------------------------------------|
| Cleaning systems, bathroom checks                       |     |                                     |
| Sanitation Checklist in use                             |     | <input checked="" type="checkbox"/> |
| All food product is dated                               |     |                                     |
| All kitchen equipment clean and good repair             |     |                                     |
| All refrigeration has working thermometer, proper temps |     |                                     |
| Proper hand washing procedures in place                 |     |                                     |
| Hot box has working thermometer, at proper temp         |     |                                     |
| Lighting / music adjusted and working order             |     |                                     |
| FOH and BOH clean and good repair                       |     |                                     |
| Proper water supply (hot & cold) drains work properly   |     |                                     |
| Dish machine, soap, sanitizer, and temps correct        |     |                                     |
| No food particles on clean plates and utensils          |     |                                     |
| All food bins labeled, covered and clean                |     |                                     |
| No evidence of roaches, flies, insects, or rodents      |     |                                     |
| No cross contamination of food products                 |     |                                     |
| Toxic items, chemicals, labeled & stored properly       |     |                                     |
| All landscaping pristine, lights, signage working       |     |                                     |
| AUDIT                                                   | YES | NO                                  |
| Employee files complete, Application, NAD, Advisor      |     |                                     |
| I-9's correct                                           |     |                                     |
| Orientation checklist signed off by associate & GM      |     |                                     |
| All servers and bartenders have proper license or cert. |     |                                     |
| All local food handlers permits on file                 |     |                                     |

MOD Name \_\_\_\_\_

Inspector Name \_\_\_\_\_

Total Score

Comments: